**Qualification**

**specification**

**NCFE CACHE Level 3 Extended Diploma in Health and Social Care (Adults) (Northern Ireland)**

**QN: 603/5355/7**

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# Summary of changes

This section summarises the changes to this Qualification Specification.

|  |  |  |
| --- | --- | --- |
| **Version** | **Publication Date** | **Summary of amendments** |
| v1.0 | September 2020 | First publication |
| v1.1 | January 2021 | Update to [UCAS](#UCAS) information within the Qualification summary. |
| v2.0 | August 2021 | Amend to the [lower boundary for grade D](#boundary), addition of the [N grade for the short answer question paper](#Ngrade) and an increase to the [number of resits](#resit) available. |
| v2.1 | January 2022 | Paragraph added in regarding [external quality assurance for graded qualifications](#EQA). |
| v2.2 | June 2022 | Further information added to the [achieving this qualification](#achievingthisqualification)section to confirm that unless otherwise stated in this specification, all learners taking this qualification must be assessed in English and all assessment evidence presented for external quality assurance must be in English.Information added to the [entry guidance](#entryguidance)section to advise that registration is at the discretion of the centre, in accordance with equality legislation and should be made on the Portal.Information added to the [support for centres](#supporthandbook)section about how to access support handbooks.Updated reference of Public Health England to UK Health Security Agency and Office for Health Improvement and Disparities. |
| v2.3 | July 2023 | Information regarding [UCAS](#UCAS) added to About this qualification, Qualification Summary. |

# Section 1

**About this qualification**

## Introduction

This Qualification Specification contains details of all the units and assessments required to complete this qualification.

To ensure that you are using the most up-to-date version of this Qualification Specification, please check the version number and date in the page footer against that of the Qualification Specification on [the](https://www.qualhub.co.uk/) NCFE website.

If you advertise this qualification using a different or shortened name, you must ensure that learners are aware that their final certificate will state the full regulated qualification title.

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* the use of PDF versions of our support materials on [the](https://www.qualhub.co.uk/) NCFE website will ensure that correct and up-to-date information is provided to learners
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* the resources and materials used in the delivery of this qualification must be age-appropriate and due consideration should be given to the wellbeing and safeguarding of learners in line with your institute’s safeguarding policy when developing or selecting delivery materials.

### Support Handbook

This qualification specification must be used alongside the mandatory support handbook which can be found on the NCFE website. This contains additional supporting information to help with planning, delivery and assessment.

This qualification specification contains all the qualification-specific information you will need that is not covered in the support handbook.

| **Qualification summary** |
| --- |
| Qualification title | NCFE CACHE Level 3 Extended Diploma in Health and Social Care (Adults) (Northern Ireland)  |
| Qualification number (QN) | 603/5355/7 |
| Total Qualification Time (TQT) | 1395 |
| Guided Learning Hours (GLH) | 1085 |
| Minimum age | 16 |
| Qualification purpose | This qualification is designed to provide learners with the knowledge, understanding and skills essential to the health and social care sector within Northern Ireland, and to support progression into Higher Education or the workplace. |
| Aims and objectives | This qualification aims to: * focus on the study of health and social care in Northern Ireland
* offer breadth and depth of study, incorporating a key core of knowledge
* provide opportunities to acquire a number of practical skills.

The objective of this qualification is to: * support access to Higher Education or assist with progression into the workplace.
 |
| Work/industry placement experience | This qualification requires learners to complete a work/industry placement experience.The minimum required number of placement hours is 100 hours. |
| Rules of combination | In order to achieve the Level 3 Extended Diploma in Health and Social Care (Adults) (Northern Ireland), learners must achieve:* a pass grade for the Level 3 Diploma in Health and Social Care (Adults) (Northern Ireland)
* four mandatory units, four optional units from Optional Group A and four optional units from Optional Group B within this qualification (all units are graded A\*–D)
* an external assessment short answer question paper graded A\*–N for mandatory unit - anatomy and physiology for health and social care - and an external synoptic extended assessment graded A\*–D covering the remaining mandatory units
* a minimum of 100 placement hours.
 |
| Grading | A\*–D  |
| Assessment method | Internally assessed and externally quality assured portfolio of evidence, externally set and assessed short answer question paper and externally set and assessed synoptic extended assessment. |
| Additional assessment requirements | All units must be assessed in line with the Level 3 Extended Diploma in Health and Social Care (Adults) (Northern Ireland) Assessment Strategy and Principles. |
| Progression | Upon achievement of this qualification learners may be able to access Higher Education and progress into a wide range of job roles within the health and social care sector in Northern Ireland.  |
| UCAS | This qualification has been allocated UCAS points. Please refer to the UCAS website for further details of the points allocation and the most up-to-date information. |
| Regulation information | This is a regulated qualification. The regulated number for this qualification is 603/5355/7  |
| Funding | This qualification may be eligible for funding. For further guidance on funding, please contact your local funding provider.  |
| Bundle offer | There is a bundle offer available for centres if they register learners on the Level 3 Diploma and Level 3 Extended Diploma at the same time. Using bundle code NDF6754, centres will receive a discounted price for the two qualifications, only paying for the Extended Diploma registration. |

### Entry guidance

This qualification is designed to provide learners with the knowledge, understanding and skills essential to the health and social care sector within Northern Ireland, and to support progression into Higher Education or the workplace.

Entry is at the discretion of the centre. However, learners should be aged 16 or above to undertake this qualification.

Registration is at the discretion of the centre, in accordance with equality legislation and should be made on the Portal.

**Centres are responsible for checking that learners have already achieved the Level 3 Diploma in Health and Social Care (Adults) (Northern Ireland) qualification prior to requesting certification for this qualification.**

Centres are responsible for ensuring that this qualification is appropriate for the age and ability of learners. They need to make sure that learners can fulfil the requirements of the learning outcomes and comply with the relevant literacy, numeracy and health and safety aspects of this qualification.

### Achieving this qualification

To be awarded the Level 3 Extended Diploma in Health and Social Care (Adults) (Northern Ireland) qualification, learners are required to successfully achieve:

* four mandatory units, four optional units from Optional Group A and four optional units from Optional Group B
* an external assessment short answer question paper for mandatory unit – anatomy and physiology for health and social care – and an external synoptic extended assessment covering the remaining mandatory units
* a minimum of 100 placement hours.

Please note that learners must also achieve the Level 3 Diploma in Health and Social Care (Adults) (Northern Ireland) qualification by successfully demonstrating their achievement of all learning outcomes of the units as detailed in the Qualification Specification on [the](https://www.qualhub.co.uk/?utm_source=ncfe&utm_campaign=longhomepage) NCFE website.

Please refer to the units table or the unit summaries in Section 2 for further information.

If the learner wishes to specialise in a subject area, we suggest choosing units from the following groupings:

Social Care

Health Studies

Health Sciences

To achieve this qualification, learners must successfully demonstrate their achievement of all learning outcomes of the units as detailed in this Qualification Specification.

Unless otherwise stated in this specification, all learners taking this qualification must be assessed in English and all assessment evidence presented for external quality assurance must be in English.

See diagram and table over the page of the structure for this qualification.



|  |  |
| --- | --- |
| **Stage 1** | The **Level 3 Diploma in Health and Social Care (Adults) (Northern Ireland) (603/4724/7) units** provide a competence-based foundation.Each unit is graded **Achieved/Not Yet Achieved** and is internally assessed. |
| **Stage 2** | The **extended diploma mandatory and optional units** assess the development of higher level knowledge and understanding.Each unit is graded **A\*–D**.Learners must complete four mandatory units, four optional units from Optional Group A and four optional units from Optional Group B within this qualification.For learners continuing their studies from Stage 1, there is a requirement of 100 placement hours. Any additional placement hours are at the discretion of centres. |
| **Stage 3** | The external **synoptic** **extended assessment** is an essay of 5,000 words for the selected mandatory units and is graded **A\*–D**.The external **short answer question paper** for the anatomy and physiology for health and social care mandatory unit is graded **A\*–N**.On achievement of both **external assessments**, the qualification grade will be **A\*–D**. |

This table shows how learners can progress through the two year Extended Diploma programme.

|  |
| --- |
| **YEAR 1** |
| **Stage 1** | **NCFE CACHE Level 3 Diploma in Health and Social Care (Adults) (Northern Ireland) (603/4724/7)**This is achievable in one academic year. It consists of 58 credits made up from mandatory and optional unitsOn successful completion, learners can exit to employment in the health and social care workforce or progress to Stage 2. |
| **YEAR 2** |
| **Stage 2** | **NCFE CACHE Level 3 Extended Diploma in Health and Social Care (Adults) (Northern Ireland) (603/5355/7)****NB:** Learners progressing to Stage 2 must have already achieved the NCFE CACHE Level 3 Diploma in Health and Social Care (Adults) (Northern Ireland) (603/4724/7).Stage 2 requires a further achievement of the mandatory and optional units for the Extended Diploma. Each unit is graded A\*–D.For learners continuing their studies from Stage 1, there is a requirement of 100 placement hours. Any additional placement hours are at the discretion of centres. |
| **Stage 3** | Stage 3 requires learners to submit one piece of extended writing and sit a short answer question paper, both are externally set and externally marked by NCFE. On achievement of both external assessments, the qualification will be graded **A\*–D.** |

### Units

To make cross-referencing assessment and quality assurance easier, we’ve used a sequential numbering system in this document for each unit.

The regulated unit number is indicated in brackets for each unit (eg M/100/7116) within Section 2.



Knowledge only units are indicated by a star. If a unit is not marked with a star, it is a skills unit or contains a mix of knowledge and skills.

**Mandatory units**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Unit number** | **Regulated unit number** | **Unit title** | **Level** | **GLH** | **Notes** |
| Shape, logo, arrow  Description automatically generated | Unit 01 | K/617/7915 | Human growth, development and wellbeing | 3 | 110 |  |
| Shape, logo, arrow  Description automatically generated | Unit 02 | J/617/6755 | Specialist areas of care practice | 3 | 85 |  |
| Shape, logo, arrow  Description automatically generated | Unit 03 | K/507/1437 | Empowerment in health and social care | 3 | 53 |  |
| Shape, logo, arrow  Description automatically generated | Unit 04 | F/617/6754 | Anatomy and physiology for health and social care | 3 | 73 |  |

**Group A optional units**

|  | **Unit number** | **Regulated unit number** | **Unit title** | **Level** | **GLH** | **Notes** |
| --- | --- | --- | --- | --- | --- | --- |
| Shape, logo, arrow  Description automatically generated | Unit 05 | D/507/1483 | Behaviour change in health and social care | 3 | 48 |  |
| Shape, logo, arrow  Description automatically generated | Unit 06 | H/507/1484 | Biochemistry for health | 3 | 55 |  |
| Shape, logo, arrow  Description automatically generated | Unit 07 | K/507/1485 | Community care provision | 3 | 45 |  |
| Shape, logo, arrow  Description automatically generated | Unit 08 | M/507/1486 | Complementary therapies and alternative medicine for health and social care | 3 | 48 |  |
| Shape, logo, arrow  Description automatically generated | Unit 09 |  R/507/1433 | Psychological perspectives in health and social care  | 3 | 54 |  |
| Shape, logo, arrow  Description automatically generated | Unit 10 | Y/507/1434 | Sociological perspectives in health and social care | 3 | 54 |  |
| Shape, logo, arrow  Description automatically generated | Unit 11 | J/507/1509 | Genetics in health and social care | 3 | 46 |  |
| Shape, logo, arrow  Description automatically generated | Unit 12 | F/507/1511 | Health education | 3 | 52 |  |
| Shape, logo, arrow  Description automatically generated | Unit 13 | J/507/1512 | Health psychology | 3 | 47 |  |
| Shape, logo, arrow  Description automatically generated | Unit 14 | R/507/1514 | Microbiology for health | 3 | 48 |  |
| Shape, logo, arrow  Description automatically generated | Unit 15 | D/507/1516 | Physiology of coordination | 3 | 44 |  |
| Shape, logo, arrow  Description automatically generated | Unit 16 | K/507/1518 | Public health for health and social care | 3 | 46 |  |
| Shape, logo, arrow  Description automatically generated | Unit 17 | M/507/1519 | Science of nutrition | 3 | 48 |  |
| Shape, logo, arrow  Description automatically generated | Unit 18 | H/507/1520 | Social policy | 3 | 46 |  |

**Group B optional units**

|  | **Unit number** | **Regulated unit number** | **Unit title** | **Level** | **GLH** | **Notes** |
| --- | --- | --- | --- | --- | --- | --- |
| Shape, logo, arrow  Description automatically generated | Unit 19 | T/507/1490 | Advocacy in health and social care | 3 | 22 |  |
| Shape, logo, arrow  Description automatically generated | Unit 20 | F/507/1489 | Epidemiology for health and social care | 3 | 25 |  |
| Shape, logo, arrow  Description automatically generated | Unit 21 | A/507/1491 | Ethics in health and social care | 3 | 29 |  |
| Shape, logo, arrow  Description automatically generated | Unit 22 | F/507/1492 | Family issues in health and social care | 3 | 30 |  |
| Shape, logo, arrow  Description automatically generated | Unit 23 | R/507/1495 | Models and systems of health care | 3 | 27 |  |
| Shape, logo, arrow  Description automatically generated | Unit 24 | Y/507/1496 | Partnership working in health and social care | 3 | 30 |  |
| Shape, logo, arrow  Description automatically generated | Unit 25 | D/507/1497 | Pharmacology | 3 | 32 |  |
| Shape, logo, arrow  Description automatically generated | Unit 26 | H/507/1498 | Physiology of ageing | 3 | 28 |  |
| Shape, logo, arrow  Description automatically generated | Unit 27 | R/507/1500 | Sociology of health and illness | 3 | 27 |  |
| Shape, logo, arrow  Description automatically generated | Unit 28 | H/507/1503 | Technology in health and social care | 3 | 31 |  |
| Shape, logo, arrow  Description automatically generated | Unit 29 | K/507/1504 | Voluntary organisations | 3 | 31 |  |

The units above may be available as stand-alone unit programmes. Please visit our website for further information.

### Specialist subject areas

If the learner wishes to specialise in a subject area, we suggest choosing optional units from the following groupings:

Social Care

Health Studies

Health Sciences

**Group A optional units**

Learners must choose four units from this optional group. Any four units can be chosen. The suggestions below may help with their decision.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Social Care** | **Health Studies** | **Health Sciences** |
|  | **Unit number** | **Unit title** | **Unit number** | **Unit title** | **Unit number** | **Unit title** |
|  | Unit 05 | Behaviour change in health and social care | Unit 05 | Behaviour change in health and social care | Unit 06 | Biochemistry for health |
|  | Unit 07 | Community care provision | Unit 07 | Community care provision | Unit 11 | Genetics in health and social care |
|  | Unit 09 | Psychological perspectives in health and social care | Unit 08 | Complementary therapies and alternative medicine for health and social care | Unit 13 | Health psychology |
|  | Unit 10 | Sociological perspectives in health and social care | Unit 09 | Psychological perspectives in health and social care | Unit 14 | Microbiology for health |
|  | Unit 13 | Health psychology | Unit 10 | Sociological perspectives in health and social care | Unit 15 | Physiology of coordination |
|  | Unit 16 | Public health for health and social care | Unit 12 | Health education | Unit 16 | Public health for health and social care |
|  | Unit 18 | Social policy | Unit 13 | Health psychology | Unit 17 | Science of nutrition |
|  |  | Unit 15 | Physiology of coordination |  |
|  | Unit 16 | Public health for health and social care |
|  | Unit 18 | Social policy |

**Group B optional units**

Learners must choose four units from this optional group. Any four units can be chosen. The suggestions below may help with their decision.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Social Care** | **Health Studies** | **Health Sciences** |
|  | **Unit number** | **Unit title** | **Unit number** | **Unit title** | **Unit number** | **Unit title** |
|  | Unit 19 | Advocacy in health and social care | Unit 20 | Epidemiology for health and social care | Unit 21 | Ethics in health and social care |
|  | Unit 21 | Ethics in health and social care | Unit 21 | Ethics in health and social care | Unit 23 | Models and systems of health care |
|  | Unit 22 | Family issues in health and social care | Unit 25 | Pharmacology | Unit 24 | Partnership working in health and social care |
|  | Unit 24 | Partnership working in health and social care | Unit 26 | Physiology of ageing | Unit 26 | Physiology of ageing |
|  | Unit 27 | Sociology of health and illness | Unit 27 | Sociology of health and illness | Unit 27 | Sociology of health and illness |
|  | Unit 28 | Technology in health and social care | Unit 28 | Technology in health and social care | Unit 28 | Technology in health and social care |
|  | Unit 29 | Voluntary organisations |   | Unit 29 | Voluntary organisations |
|  |

### Rationale for synoptic assessment

Synoptic assessment encourages the learner to combine elements of their learning and to show accumulated knowledge and understanding across units and/or learning outcomes.

Synoptic assessment enables the learner to show their ability to integrate and apply knowledge, understanding and skills with breadth and depth. It also requires them to demonstrate their capability to apply knowledge, understanding and skills across a range of units and learning outcomes which are being assessed.

There will be **one** externally set and externally marked synoptic extended assessment covering the content of the following units:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Unit number** | **Regulated unit number** | **Unit title** | **Level** | **GLH** |
| Unit 01 | K/617/7915 | Human growth, development and wellbeing | 3 | 110 |
| Unit 02 | J/617/6755 | Specialist areas of care practice | 3 | 85 |
| Unit 03 | K/507/1437 | Empowerment in health and social care | 3 | 53 |

Progression to higher level studies

This qualification aims to provide learners with a number of progression options, including higher level studies at university or FE colleges. The skills required to progress to higher academic studies are different from those required at Levels 1 and 2. Level 3 qualifications enable the development of these skills. Although there is no single definition of higher level learning skills, they include:

* checking and testing information
* supporting points with evidence
* self-directed study
* self-motivation
* thinking for yourself
* analysing and synthesising information/materials
* critical thinking and problem solving
* working collaboratively
* reflecting upon learning and identifying improvements.

Level 3 criteria can require learners to **analyse**, **draw conclusions**, **interpret** or **justify**, which are all examples of higher level skills. This means that evidence provided for the portfolio will also demonstrate the development and use of higher level learning skills in preparation for continuing study at a higher level.

If you need any further information, please see Section 4 or refer to the NCFE website.

### How the qualification is assessed

Assessment is the process of measuring a learner’s skill, knowledge and understanding against the standards set in a qualification.

This qualification is internally and externally assessed as well as being subject to external quality assurance.

The assessment consists of the following components:

* an internally assessed portfolio of evidence
* an externally set and assessed extended assessment
* an externally set and assessed short answer question paper.

The Level 3 Extended Diploma in Health and Social Care (Adults) (Northern Ireland) is a knowledge-based qualification that builds upon the competence-based NCFE CACHE Level 3 Diploma in Health and Social Care (Adults) (Northern Ireland) (603/4724/7).

Learners must be successful in **all** components to gain the Level 3 Extended Diploma in Health and Social Care (Adults) (Northern Ireland).

Learners who aren’t successful can resubmit work within the registration period; however, a charge may apply.

All the evidence generated by the learner will be assessed against the standards expected of a Level 3 learner for each learning outcome.

### Placement in a real work environment

The learner studying for the Extended Diploma will be required to attend placement in a real work environment to support their learning. Placement supports learning by providing opportunities for the learner to apply knowledge to practice, receive feedback and reflect on their experience. Placement also provides opportunities for learners to observe professional practice in action and gain valuable employability skills.

Learners should be encouraged to reflect on their placement experience throughout the delivery of this qualification. Placement Handbooks, which include a Professional Skills Profile, will be provided to you, the learner and their placement mentor. They will be used to record the learner’s progress in several core subject areas. The following knowledge and skills within the Professional Skills Profile are covered by mandatory units within the Extended Diploma:

* positive role modelling
* policy and procedure
* communication
* valuing diversity
* inclusive practice
* health and safety
* professional development.

Placement Handbooks must be completed with input from you, the learner and the placement mentor.

The minimum required placement hours is 100 hours.

### Confirming completion of placement hours

The required placement hours do not contribute to the overall qualification grade; however, they are a mandatory element of this qualification. The Placement Handbook will serve as evidence that the required minimum placement hours in a real work environment have been completed.

### Internal assessment

Sample tasks for the internally assessed mandatory units are available upon request. You can contextualise these tasks to suit the needs of your learners to help them build up their portfolio of evidence. For further information about contextualising the tasks, please contact the Curriculum team.

Each learner must create a portfolio of evidence which demonstrates achievement of all the learning outcomes associated with each unit.

Internally assessed work should be completed by the learner in accordance with the Qualification Specification.

The Tutor must be satisfied that the work produced is the learner’s own.

If a centre chooses to create their own internal assessment tasks, they must:

* be accessible and lead to objective assessment judgements
* permit and encourage authentic activities where the learner’s own work can be clearly judged
* refer to Course File Documents on the NCFE website.

**Supervision of learners and your role as an Assessor**

Guidance on how to administer the internal assessment and the support you provide to learners can be found on [the](https://www.qualhub.co.uk/?utm_source=ncfe&utm_campaign=longhomepage) NCFE website.

### Feedback to learners

Guidance on providing feedback during teaching and learning and each stage of the assessment can be found on [the](https://www.qualhub.co.uk/?utm_source=ncfe&utm_campaign=longhomepage) NCFE website.

### How to sign off a unit

**Knowledge learning outcomes**

Theevidence record in the assessment grading criteria table must be completed in order to achieve the unit.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | **Assessment grading criteria** | **Assessment of learning** | **Evidence record** |
| **B1** | 3.1 | Explain how care values are promoted and applied in practice in specialist areas of care | Learners may use examples to explain how care values are promoted and applied in practice when supporting an individual in specialist areas of care. |  |

**Skills learning outcomes**

The skills learning outcomes evidence record must be completed in order to achieve the unit.

|  |  |  |
| --- | --- | --- |
| **Learning outcome** | **Assessment criteria** | **Evidence record** |
| 7. Be able to design a health education campaign. | 7.1. | Choose a public health issue. |  |
| 7.2. | Create a health education campaign. |  |
| 7.3. | Present own health education campaign. |  |

The following optional unit within the Optional Unit Specification contains a skills learning outcome which can be achieved through simulation:

* Unit 12: Health education.

**Unit sign off**

Theunit submission form (see Section 2) must be completed for every unit achieved.

### External assessment

Each learner is required to undertake two external assessments, **one** covering the anatomy and physiology for health and social care mandatory unit and **one** covering the remaining mandatory units.

The external assessment covers:

* approximately 30% of the Extended Diploma content.

These external assessments will require a substantial amount of research and work.

External assessments are set and marked by us. The assessment assesses learners’ knowledge and understanding based on the mandatory units of this qualification. Centres must not assess or internally quality assure external assessments or provide any feedback to the learner about their performance in the external assessment.

The external assessments consist of a combination of:

set date and time (invigilated). NCFE specifies the exact date and time that the external assessment must be administered in the centre. This refers to the externally assessed short answer question paper graded A\*–N for mandatory unit - anatomy and physiology for health and social care

* independent self study (Extended Assessment). These are completed independently by learners and submitted to NCFE for marking at set times during the year. This refers to the external synoptic extended assessment graded A\*–D covering the remaining mandatory units.

For further information, centres should refer to the Regulations for the Conduct of External Assessment and Qualifications Specific Instructions for Delivery documents available on the Policies & Documents page on [the](https://www.qualhub.co.uk/?utm_source=ncfe&utm_campaign=longhomepage) NCFE website.

Where qualifications have external assessment, centres must have entered learners using the Portal to access the assessment.

Centres must enter learners at least 10 working days in advance of the submission date to avoid late entry fees.

If applicable, pre-release material will be made available by NCFE in advance of the assessment. All centres with entries will be notified.

The external assessment material will be sent out in time for the start of the assessment. Assessment materials must be kept secure at all times.

You must return all external assessment materials and partially or fully completed learner work to NCFE within one working day of the published submission date.

### N (near pass) grade

It is possible to achieve an N grade on the short answer question paper (HSCNISAE) which assesses Unit 04 Anatomy and Physiology for Health and Social Care (F/617/6754). The N grade acts as a safety net for learners who have achieved in all other areas of the qualification, and narrowly missed a pass mark in this exam.

The N-grade is calculated for each assessment, so will be different in each assessment window.

It is the higher of:

* + - the same number of marks below D that D is from C
		- halfway between the D boundary and 0.

### Enquiries about results

If a centre believes a learner’s result is at variance with their reasonable expectations, they can submit an enquiry about a result in line with our Enquiries and Appeals about Results and Assessment Decisions Policy, which is available on the Policies & Documents page on [the](https://www.qualhub.co.uk/?utm_source=ncfe&utm_campaign=longhomepage) NCFE website.

### Assessment windows

For assessments sat in windows, the centre must enter learners to the specified window. This will be either a set date and time assessment or a window in which the assessment will be completed.

The last date that we will accept learner work for a specified assessment window is by that assessment window’s cut-off date.

**Please note: the ‘cut-off date’ is the last day that returned scripts will be accepted for the specified assessment window.**

On completing their work at the end of the assessment window, learners must sign the assessment declaration to authenticate the work produced as their own. Centres must ensure that all assessments are submitted for marking in accordance with the assessment windows.

### Paper-based assessment

Entries must be submitted via the Portal 10 working days before the date of assessment.

Results are issued on the specified results release date. The date the results are released will be affected if papers are returned late to us.

Late return fees will apply to any completed external assessment material that is not received 48 hours following the external assessment and will be marked at NCFE’s discretion. Please refer to the Fees and Pricing Document s page on the NCFE website for further information.

Fast Track Entries/Late and Very Late Entries will be accepted with less than 5–10 working days’ notice, but an administration fee will be charged. For details of fees, please refer to the current Fees and Pricing Guide on the Policies & Documents page on the NCFE website.

### External assessment conditions

To access the external assessment, centres need to ensure that learners are entered for the external assessment through the online assessment platform as appropriate.

There are two assessment windows for the external short answer question paper assessment and two assessment windows for the external synoptic extended assignment during the year. Please refer to the External Assessment timetable on the NCFE website for specific dates.

For the external synoptic extended assignment, learners are entitled to one resit, which may be chargeable. This means that learners can have a total of two attempts. Learners may attempt the same theme twice.

For the short answer question paper assessment, learners are entitled to one resit plus one additional opportunity. The additional opportunity is for the length of the 16–19 performance table moratorium in England only. This means learners can have a total of three attempts.

If you know before the assessment window opens that a learner is no longer able to sit the external assessment, please contact us to cancel or transfer the entry.

Submissions will be limited to one submission and one subsequent submission per extended assessment title. Learners who refer or achieve a pass grade can try for a higher grade by re-submitting or attempting to upgrade each submission of their extended assessment once only.

This change has been made to ensure that the Level 3 Extended Diploma maintains the quality and rigour expected of a qualification which allows entry to Higher Education.

For more information on external assessment conditions, please see the Regulations for the Conduct of External Assessments and Qualification Specific Instructions for Delivery on the Policies & Documents page on [the](https://www.qualhub.co.uk/?utm_source=ncfe&utm_campaign=longhomepage) NCFE website.

### Grading information

Each unit of the qualification is graded using a structure of A\*–D.

* At the end of each unit there is an assessment grading criteria table. The evidence record in the assessment grading criteria table must be completed in order to achieve the unit.The table shows what the learner must do to achieve each grading criterion within the unit. The learner must achieve all the criteria for a grade to be awarded. A higher grade may not be awarded before a lower grade has been achieved, although component criteria of a higher grade may have been achieved. Unit 04 is externally assessed and therefore there is no assessment grading criteria table provided.
* The optional unit, Unit 12: Health education, within the Optional Unit Specification contains a skills learning outcome which can be achieved through simulation.

Centres must then submit each unit grade via the Portal. The grades submitted will be checked and confirmed through the external quality assurance process. This is known as ‘banking’ units.

### External Quality Assurance (CACHE and NCFE graded qualifications)

Summatively assessed and internally quality assured grades for at least one completed unit must be submitted via the Portal, prior to an EQA review taking place. Following the EQA review, the unit grades will either be accepted and banked by your External Quality Assurer or, if they disagree with the grades, they will be rejected. If a grade is rejected, centres must reassess, regrade, internally quality assure and resubmit the new unit grade in line with EQA actions.

**Record of grades achieved**

The record of grades achieved table on the next page can be used to calculate the final qualification grade.

The final grade is calculated by adding the points for each unit and then converting to a final overall grade using the overall boundary points table.

For further information on assessment, please refer to the User Guide to the External Quality Assurance Visit Report.

**Whilst NCFE does not anticipate any changes to our aggregation methods or any overall grade thresholds, there may be exceptional circumstances in which it is necessary to do so to secure the maintenance of standards over time. Therefore, overall grade thresholds published within this Qualification Specification may be subject to change.**

### Records of grades achieved for the Level 3 Extended Diploma in Health and Social Care (Adults) (Northern Ireland)

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Grades achieved** | **A\*** | **A** | **B** | **C** | **D** | **N** | **Points/ unit** | **Points/****grade** |
| **Unit ref.** | **Description of unit** | **Hours****per unit** | **No. of incs** | **Grade****value** | **Points** | **Grade****value** | **Points** | **Grade****value** | **Points** | **Grade****value** | **Points** | **Grade****value** | **Points** | **Points** |  |  |
|  | **Mandatory units** |
| K/617/7915 | Human growth, development and wellbeing | 110 | 8 | 5 | 40 | 4 | 32 | 3 | 24 | 2 | 16 | 1 | 8 | **N/A** |  |  |
| J/617/6755 | Specialist areas of care practice | 85 | 7 | 5 | 35 | 4 | 28 | 3 | 21 | 2 | 14 | 1 | 7 | **N/A** |  |  |
| K/507/1437 | Empowerment in health and social care | 53 | 4 | 5 | 20 | 4 | 16 | 3 | 12 | 2 | 8 | 1 | 4 | **N/A** |  |  |
| F/617/6754 | Anatomy and physiology for health and social care | 73 | 6 | 5 | 30 | 4 | 24 | 3 | 18 | 2 | 12 | 1 | 6 | **0** |  |  |
| Extended Diploma extended assessment | N/A | 7 | 5 | 35 | 4 | 28 | 3 | 21 | 2 | 14 | 1 | 7 | **N/A** |  |  |
| Mandatory Units Total |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Grades achieved** | **A\*** | **A** | **B** | **C** | **D** | **Points/ unit** | **Points/****grade** |
| **Unit ref.** | **Description of unit** | **Hours****per unit** | **No. of incs** | **Grade****value** | **Points** | **Grade****value** | **Points** | **Grade****value** | **Points** | **Grade****value** | **Points** | **Grade****value** | **Points** |  |  |
| **Optional Units** |
| **4 units from Optional Group A (below):** |  |  |
| D/507/1483 | Behaviour change in health and social care | 48 | 4 | 5 | 20 | 4 | 16 | 3 | 12 | 2 | 8 | 1 | 4 |  |  |
| H/507/1484 | Biochemistry for health | 55 | 4 | 5 | 20 | 4 | 16 | 3 | 12 | 2 | 8 | 1 | 4 |  |  |
| K/507/1485 | Community care provision | 45 | 4 | 5 | 20 | 4 | 16 | 3 | 12 | 2 | 8 | 1 | 4 |  |  |
| M/507/1486 | Complementary therapies and alternative medicine for health and social care | 48 | 4 | 5 | 20 | 4 | 16 | 3 | 12 | 2 | 8 | 1 | 4 |  |  |
| R/507/1433 | Psychological perspectives in health and social care | 54 | 4 | 5 | 20 | 4 | 16 | 3 | 12 | 2 | 8 | 1 | 4 |  |  |
| Y/507/1434 | Sociological perspectives in health and social care | 54 | 4 | 5 | 20 | 4 | 16 | 3 | 12 | 2 | 8 | 1 | 4 |  |  |
| J/507/1509 | Genetics in health and social care | 46 | 4 | 5 | 20 | 4 | 16 | 3 | 12 | 2 | 8 | 1 | 4 |  |  |
| F/507/1511 | Health education | 52 | 4 | 5 | 20 | 4 | 16 | 3 | 12 | 2 | 8 | 1 | 4 |  |  |
| J/507/1512 | Health psychology | 47 | 4 | 5 | 20 | 4 | 16 | 3 | 12 | 2 | 8 | 1 | 4 |  |  |
| R/507/1514 | Microbiology for health | 48 | 4 | 5 | 20 | 4 | 16 | 3 | 12 | 2 | 8 | 1 | 4 |  |  |
| D/507/1516 | Physiology of coordination | 44 | 4 | 5 | 20 | 4 | 16 | 3 | 12 | 2 | 8 | 1 | 4 |  |  |
| K/507/1518 | Public health for health and social care | 46 | 4 | 5 | 20 | 4 | 16 | 3 | 12 | 2 | 8 | 1 | 4 |  |  |
| M/507/1519 | Science of nutrition | 48 | 4 | 5 | 20 | 4 | 16 | 3 | 12 | 2 | 8 | 1 | 4 |  |  |
| H/507/1520 | Social policy | 46 | 4 | 5 | 20 | 4 | 16 | 3 | 12 | 2 | 8 | 1 | 4 |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Grades achieved** | **A\*** | **A** | **B** | **C** | **D** | **Points/ unit** | **Points/****grade** |
| **Unit ref.** | **Description of unit** | **Hours****per unit** | **No. of incs** | **Grade****value** | **Points** | **Grade****value** | **Points** | **Grade****value** | **Points** | **Grade****value** | **Points** | **Grade****value** | **Points** |  |  |
| **4 units from Optional Group B (below)** |  |  |
| T/507/1490 | Advocacy in health and social care | 22 | 2 | 5 | 10 | 4 | 8 | 3 | 6 | 2 | 4 | 1 | 2 |  |  |
| F/507/1489 | Epidemiology for health and social care | 25 | 2 | 5 | 10 | 4 | 8 | 3 | 6 | 2 | 4 | 1 | 2 |  |  |
| A/507/1491 | Ethics in health and social care | 29 | 2 | 5 | 10 | 4 | 8 | 3 | 6 | 2 | 4 | 1 | 2 |  |  |
| F/507/1492 | Family issues in health and social care | 30 | 2 | 5 | 10 | 4 | 8 | 3 | 6 | 2 | 4 | 1 | 2 |  |  |
| R/507/1495 | Models and systems of health care | 27 | 2 | 5 | 10 | 4 | 8 | 3 | 6 | 2 | 4 | 1 | 2 |  |  |
| Y/507/1496 | Partnership working in health and social care | 30 | 2 | 5 | 10 | 4 | 8 | 3 | 6 | 2 | 4 | 1 | 2 |  |  |
| D/507/1497 | Pharmacology | 32 | 2 | 5 | 10 | 4 | 8 | 3 | 6 | 2 | 4 | 1 | 2 |  |  |
| H/507/1498 | Physiology of ageing | 28 | 2 | 5 | 10 | 4 | 8 | 3 | 6 | 2 | 4 | 1 | 2 |  |  |
| R/507/1500 | Sociology of health and illness | 27 | 2 | 5 | 10 | 4 | 8 | 3 | 6 | 2 | 4 | 1 | 2 |  |  |
| H/507/1503 | Technology in health and social care | 31 | 2 | 5 | 10 | 4 | 8 | 3 | 6 | 2 | 4 | 1 | 2 |  |  |
| K/507/1504 | Voluntary organisations | 31 | 2 | 5 | 10 | 4 | 8 | 3 | 6 | 2 | 4 | 1 | 2 |  |  |
| Optional Units Total  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Extended Diploma Total**  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  | **= Total Extended Diploma Points:**  |  |
|  |  |  |  |  |  |  |  |  | **= Extended Diploma Grade:** |  |
|  |  |  |  |  |  |  |  |  | **Pass grade for Level 3 Diploma in Health and Social Care (Adults) (Northern Ireland) []** |  |
|  |  |  |  |  |  |  |  |  | **+ Extended Diploma Placement Hours Completed (100 Hours) []** |  |

Overall boundary points

|  |  |
| --- | --- |
| **Grade** | **Points score** |
|  A\* | 235–280 |
| A | 190–234 |
| B | 145–189 |
| C | 100–144 |
| D | 50–99 |

**No. of increments x grade value = points for unit assessment or external assessment**

The incremental weighting of each internal assessment is based on the average total hours to achieve the unit.

The incremental weighting of each external assessment is based on the average total hours to achieve the external assessments.

Grade value: A\* value ‘5’ to D value ‘1’

# Section 2

**Unit content and
assessment guidance**

## Unit content and assessment guidance

This section provides details of the structure and content of this qualification.

The types of evidence listed are for guidance purposes only. Within learners’ portfolios, other types of evidence are acceptable if all learning outcomes are covered and if the evidence generated can be internally and externally quality assured. For approval of methods of internal assessment other than portfolio building, please contact our Quality Assurance team.

The explanation of terms explains how the terms used in the unit content are applied to this qualification. This document can be found in Section 3.

For further information or guidance about this qualification, please contact our Customer Support team.

Unit 01 Human growth, development and wellbeing (K/617/7915)

|  |  |
| --- | --- |
| Unit summary | The aim of this unit is to provide learners with knowledge and understanding of human growth, development and wellbeing. |
| Guided learning hours  | 110 |
| Level | 3 |
| Mandatory/optional | Mandatory |
| Grading | This unit is graded A\*–D |
| Internally/externally assessed | Internally assessed |

|  |  |
| --- | --- |
| **Learner name:** |  |
| **Centre no:** |  |

|  |  |
| --- | --- |
| **Learning outcomes**The learner will: | **Assessment criteria**The learner can: |
| 1. Understand development from conception to birth | 1.1 Outline stages of development from conception to birth |
| 1.2 Explain potential effectson development from conception to birth |
| 2. Understand human growth and development across the lifespan | 2.1 Describe life stages of human development |
| 2.2 Describe social, emotional, physical and cognitive developments within each life stage |
| 2.3 Explain holistic development |
| 3. Understand theories of human growth and development | 3.1 Explain the nature-versus-nurture debate in relation to human growth and development |
| 3.2 Compare and contrast theories of human growth and development |
| 3.3 Describe factors which affect human growth and development |
| 4. Understand models of health and wellbeing | 4.1 Explain the medical model of health and wellbeing |
| 4.2 Explain the social model of health and wellbeing |
| 4.3 Describe the role and purpose of individualised care planning |
| 5. Understand the role of health promotion within public health | 5.1 Describe benefits to **individuals** and society of healthy lifestyles |
| 5.2 Discuss current public health issues |
| 5.3 Evaluate current public health campaigns  |
| 5.4 Analyse the role of health promotion within public health |
| 5.5 Explain how practitioners contribute to health promotion |

**Unit 01 Human growth, development and wellbeing (K/617/7915) (cont’d)**

**Assessment guidance**

|  |
| --- |
| **Delivery and assessment** |
| This unit must be assessed in line with the Level 3 Extended Diploma in Health and Social Care (Adults) (Northern Ireland) Assessment Strategy and Principles.This unit must be taught in context of legislation and statutory guidance followed in Northern Ireland. |
| **Unit guidance** |
| **Individual(s)**: person(s) accessing services |

**Delivery guidance**

|  |
| --- |
| **Learning outcome 1** |
| **Stages of development from conception to birth:** gestation period and significant developments.**Effects:** pre-conception experiences, pre-birth experiences, complications during pregnancy, complications during labour. |
| **Learning outcome 2**  |
| **Life stages:** infancy; childhood; adolescence; early, middle and late adulthood.**Developments:** social developments: social skills, relationships, independence, cultural, interaction emotional developments: attachment, emotional security, self-image, self-esteem, confidence and resilience physical developments: gross and fine motor skills, puberty, sexual maturity.cognitive developments: speech, language and communication, reasoning and thinking, problem-solving skills, abstract and creative thinking, neuroscience and brain functioning**Holistic development**: the ways individuals develop holistically through the interdependency of each area.  |
| **Learning outcome 3**  |
| **Nature-versus-nurture**:nature: genetic, inherited characteristics and biological influences related to human development and behaviournurture: environmental influences related to human development and behaviour.**Theories**:cognitive – Piaget, Kohlberg, Vygotskypsychosocial – Eriksonhumanist – Maslowlearning/conditioning – Skinnersocial learning – Banduraecological – Bronfenbrenner.**Factors**: biological, lifestyle, transitions and significant life events, health, education, employment, socio-economic, culture, environment, relationships, bullying, aspirations. |

**Unit 01 Human growth, development and wellbeing (K/617/7915) (cont’d)**

|  |
| --- |
| **Learning outcome 4** |
| **Medical model**: biological/physical, diagnosis, treatment, cure.**Social model**:individual experience, social perception, equality, inclusion, participation.**Care planning**: meet individual care and support needs, action planning and goal setting, risk management, consistency and continuity of care. Consider: the care-planning cycle – person-centred, assess, implement, monitor, review, revise. |
| **Learning outcome 5**  |
| **Benefits**:individuals: physical, mental and emotional health, quality of life, life expectancy, level of dependencysociety: disease prevention.**Public health issues**: mental health, child and maternal health, sexual health, obesity, smoking, alcohol, physical activity.**Public health campaigns**: in relation to public health issues, national and local.**Role**: prevention, education, empowerment, advocacy, self-care, service improvement, contribution to public health initiatives and campaigns, evidence-based.**Practitioners**: nurses and midwives, dieticians, dentists and hygienists, occupational therapists, social workers, teachers. |

**Unit 01: Assessment grading criteria**

The table below shows what the learner must do to achieve each grading criterion. The learner must achieve all the criteria for a grade to be awarded. A higher grade may not be awarded before a lower grade has been achieved, although component criteria of a higher grade may have been achieved.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Learner name:** |  | **PIN:** |  | **Centre no:** |  | **ULN:** |  |

|  | **AC** | **Assessment grading criteria** | **Assessment of learning** | **Evidence record** |
| --- | --- | --- | --- | --- |
| **D1**  | 1.1 | Outline stages of development from conception to birth.  | The learner must outline significant developmental milestones that occur during the gestation period. |  |
| **D2**  | 1.2 | Explain potential affects on development from conception to birth. | The learner must explain one (1) potential effect on development at each of the following identified stages:* pre-conception
* pre-birth including complications during pregnancy and labour.
 |  |
| **D3** | 2.1 | Describe life stages of human development. | The learner must describe key developmental milestones at each stage of human development. |  |
| **D4**  | 3.1 | Explain the nature-versus-nurture debate in relation to human growth and development. | The learner must explain what is understood by the nature-versus-nurture debate in context of human development. |  |
| **D5**  | 3.3 | Describe factors which affect human growth and development.  | The learner must describe four (4) different factors which may affect human growth and development. |  |
| **D6** | 5.1 | Describe benefits to individuals and society of healthy lifestyles. | The learner must describe three (3) benefits to individuals and three (3) benefits to society of adopting a healthy lifestyle. |  |
| **D7**  | 4.3 | Describe the role and purpose of individualised care planning. | The learner must describe the benefits to an individual of person-centred care planning. |  |
| **D8**  | 5.5 | Explain how practitioners contribute to health promotion. | The learner must use four (4) examples to explain how practitioners contribute to health promotion. |  |
| **D9** |  | Show evidence of reading or use of sources.Include an accurate reference list (bibliography). | There should be evidence of learners’ reading or use of sources.Learners must use a minimum of two (2) traceable references to support the discussion.Learners must include an accurate reference list (bibliography) at the end of the assessment task. |  |
| **C1** | 2.2 | Describe social, emotional, physical and cognitive developments within each life stage. | The learner must describe key developmental milestones in each area of development identified at each life stage. Illustrations may be used to support the description. |  |
| **C2** | 2.3 | Explain holisitic development. | The learner must explain the interdependency of developmental areas on human growth and development. An example may be used to explain holistic development in the context of health and social care. |  |
| **C3** | 3.2 | Compare and contrast theories of human growth and development. | The learner must be able to compare and contrast two (2) theories of human growth and development.  |  |
| **C4** |  | Show evidence of reading or use of sources with referencing relevant to the explanations.Good use of vocabulary and grammar. | Use of referencing should show evidence of reading or use of sources.Vocabulary and grammar should be appropriate and accurate for purposes. |  |
| **B1** | 4.1 | Explain the medical model of health and wellbeing. | The learner must explain two (2) examples of a medical model of health and wellbeing. |  |
| **B2** | 4.2 | Explain the social model of health and wellbeing. | The learner must explain two (2) examples of a social model of health and wellbeing. |  |
| **B3** |  | Show evidence of reading or use of sources.Referencing supports discussion. | Use of reading or use of sources should be shown through a range of relevant referencing.Referencing should be used appropriately to support view or discussion. |  |
| **A1** | 5.2 | Discuss current public health issues. | The learner must discuss two (2) public health issues. |  |
| **A2** | 5.3 | Evaluate current public health campaigns. | The learner must evaluate one (1) current public health campaign. |  |
| **A3** |  | Show evidence of wider background reading or use of sources.Referencing supports discussion and evaluation. | Wider background reading should be evident or a wide range of source material should be used.  |  |
| **A\*1** | 5.4 | Analyse the role of health promotion within public health. | The learner must analyse the role of health promotion within public health. Examples may be used in the response to support the analysis. |  |
| **A\*2** |  | Show evidence of a range of background reading or use of sources used selectively. | An extensive range of background reading or use of sources should be used selectively and cited appropriately. |  |

Unit 02 Specialist areas of care practice (J/617/6755)

|  |  |
| --- | --- |
| Unit summary | The aim of this unit is to provide the learner with knowledge and understanding of specialist areas of care. |
| Guided learning hours  | 85 |
| Level | 3 |
| Mandatory/optional | Mandatory |
| Grading | This unit is graded A\*–D |
| Internally/externally assessed | Internally assessed |

|  |  |
| --- | --- |
| **Learner name:** |  |
| **Centre no:** |  |

|  |  |
| --- | --- |
| **Learning outcomes**The learner will: | **Assessment criteria**The learner can: |
| 1. Understand health and social care provision | 1.1 Identify types of health and social care services |
| 1.2 Describe functions of health and social care provision |
| 1.3 Analyse factors that influence national and local service delivery |
| 1.4 Explain practitioner roles within health and social care |
| 2. Understand specialist areas of care | 2.1 Analyse the impact of conditions on the wellbeing of individuals |
| 2.2 Explain the impact of conditions for the care of individuals |
| 2.3 Describe services to support **individuals** within specialist areas of care |
| 3. Understand implementation of care values in specialist areas of care | 3.1 Explain how care values are promoted and applied in practice in specialist areas of care |
| 4. Understand the impact of drivers on specialist areas of care provision | 4.1 Evaluate the impact of drivers on specialist areas of care provision |

**Unit 02 Specialist areas of care practice (J/617/6755) (cont’d)**

**Assessment guidance**

|  |
| --- |
| **Delivery and assessment** |
| This unit must be assessed in line with the Level 3 Extended Diploma in Health and Social Care (Adults) (Northern Ireland) Assessment Strategy and Principles.This unit must be taught in context of legislation and statutory guidance followed in Northern Ireland. |
| **Unit guidance** |
| **Individual(s)**: person(s) accessing services. |

**Delivery guidance**

|  |
| --- |
| **Learning outcome 1**  |
| **Types:** statutory, private, voluntary.**Functions:** promote health and wellbeing; ensure provision and improvement of high-quality, cost-effective care, support and treatment; provide services to meet ongoing needs and utilise the health and social care practitioner’s expertise.**Factors:** availability of resources; needs-led versus service-led to meet diverse needs; referral protocol/eligibility criteria; accessibility of services; demand for services; location of services; liaison with individuals, practitioners, colleagues, parents/carers; partnerships between statutory, private and voluntary organisations; service autonomy – dependency on funding; community involvement in relation to needs; formal versus informal care.**Practitioner roles:** across national and local statutory, private and voluntary provision. |
| **Learning outcome 2** |
| **Impact:** physical, social, emotional and cognitive wellbeing. **Conditions:** eg dementia, physical disability, sensory loss, acquired brain injury, learning disability, autistic spectrum, substance misuse, profound and complex needs, chronic health conditions, multiple conditions, mental health, terminal illness. Consider: causes, types, signs and symptoms; treatment options.**Services**: range of specialist services, referral protocol. |
| **Learning outcome 3** |
| **Care values are promoted and applied:** duty of care; safeguarding; person-centred; partnership; dignity; respect; equality, diversity and rights; communication; confidentiality; independence. Consider: individual needs and preferences, daily routines, informed choice, decision-making, active support, aids and adaptations, health and safety. |
| **Learning outcome 4** |
| **Drivers:** demographics; personalisation; co-production; integration; community capacity; whole-systems approach; information management; prevention, early intervention and reduction; reablement; rehabilitation; wellbeing; values-based. |

**Unit 02: Assessment grading criteria**

The table below shows what the learner must do to achieve each grading criterion. The learner must achieve all the criteria for a grade to be awarded. A higher grade may not be awarded before a lower grade has been achieved, although component criteria of a higher grade may have been achieved.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Learner name:** |  | **PIN:** |  | **Centre no:** |  | **ULN:** |  |

|  | **AC** | **Assessment grading criteria** | **Assessment of learning** | **Evidence record** |
| --- | --- | --- | --- | --- |
| **D1**  | 1.1 | Identify types of health and social care services. | Identify three (3) different types of health and social care services. One (1) service should be identified from:* statutory provision
* private provision
* voluntary provision.
 |  |
| **D2**  | 1.2 | Describe functions of health and social care provision. | Describe five (5) functions of health and social care provision.  |  |
| **D3** | 1.4 | Explain practitioner roles within health and social care. | Learners must explain the roles of the health and social care practitioner across national and local statutory, private and voluntary provision. |  |
| **D4** |  | Show evidence of reading or use of sources.Include an accurate reference list (bibliography). | There should be evidence of learners’ reading or use of sources.Learners must use a minimum of two (2) traceable references.Learners must include an accurate reference list (bibliography) at the end of the assessment task. |  |
| **C1** | 2.2 | Explain theimpact of conditions for the care of individuals | Explain the impact of one (1) condition for the care of an individual. Learners may find it useful to use an example |  |
| **C2** | 2.3 | Describe services to support individuals within specialist areas of care | Learners may use an example to describe services available to support individuals with a specialist care need |  |
| **C3** |  | Show evidence of reading or use of sources with referencing relevant to the explanations.Good use of vocabulary and grammar. | Use of referencing should show evidence of reading or use of sources.Vocabulary and grammar should be appropriate and accurate for purpose. |  |
| **B1** | 2.1 | Analyse theimpact of conditionson the wellbeing of individuals | Learners must consider the impact to the individuals holistic wellbeing within their analysis |  |
| **B2** | 3.1 | Explain how care values are promoted and applied in practice in specialist areas of care | Learners may use examples to explain how care values are promoted and applied in practice when supporting an individual in specialist areas of care |  |
| **B3** |  | Show evidence of reading or use of sources.Referencing supports discussion. | Use of reading or use of sources should be shown through a range of relevant referencing.Referencing should be used appropriately to support view or discussion. |  |
| **A1** | 1.3 | Analysefactors that influence national and local service delivery. | Learners must analyse four (4) factors that influence national and local service delivery. |  |
| **A2** |  | Show evidence of wider background reading or use of sources.Referencing supports discussion and analysis. | Wider background reading should be evident or a wide range of sources material should be used. Referencing should support discussion and analysis. |  |
| **A\*1** | 4.1 | Evaluate the impact of drivers on specialist areas of care provision. | Learners may use examples to evaluate the impact of two (2) drivers on specialist areas of care provision. |  |
| **A\*2** |  | Show evidence of a range of background reading or use of sources used selectively. | Learners should show the ability to consider or explore relevant issues which contribute to the evaluation.An extensive range of background reading or use of sources should be used selectively and cited appropriately. |  |

### Shape, logo, arrow  Description automatically generated**Unit 03 Empowerment in health and social care (K/507/1437)**

|  |  |
| --- | --- |
| Unit summary | The aim of this unit is to provide learners with knowledge and understanding of empowerment in health and social care. |
| Guided learning hours  | 53 |
| Level | 3 |
| Mandatory/optional | Mandatory |
| Grading | This unit is graded A\*–D |
| Internally/externally assessed | Internally assessed |

|  |  |
| --- | --- |
| **Learner name:** |  |
| **Centre no:** |  |

|  |  |
| --- | --- |
| **Learning outcomes**The learner will: | **Assessment criteria**The learner can: |
| 1. Understand empowerment of individuals in health and social care | 1.1 Explain the importance of empowering **individuals** |
| 1.2 Explain how legislation and standards inform practice when empowering individuals |
| 1.3 Analyse how factors affect the empowerment of individuals |
| 1.4 Discuss strategies used to empower individuals |
| 2. Understand risk management when empowering individuals in health and social care settings | 2.1 Describe risks involved when empowering individuals |
| 2.2 Explain tensions when balancing the rights of the individual against the health and social care practitioner’s duty of care |
| 2.3 Explain how to manage risks when empowering individuals |
| 3. Understand the roles and responsibilities of the health and social care practitioner when empowering individuals | 3.1 Critically evaluate the roles and responsibilities of the health and social care practitioner when empowering individuals |

**Unit 03 Empowerment in health and social care (K/507/1437) (cont’d)**

**Assessment guidance**

|  |
| --- |
| **Delivery and assessment** |
| This unit must be assessed in line with the Level 3 Extended Diploma in Health and Social Care (Adults) (Northern Ireland) Assessment Strategy and Principles.This unit must be taught in context of legislation and statutory guidance followed in Northern Ireland. |
| **Unit guidance** |
| **Individual(s)**: person(s) accessing services |

**Delivery guidance**

|  |
| --- |
| **Learning outcome 1** |
| **Importance of empowering**:gain control of own life;fulfilment of capacity; self-reliance; participation in decisions; dignity; respect; sense of belonging/contribution; self-esteem; self-confidence; health and wellbeing.**Legislation** **and standards**: Care Act 2014, Health and Social Care Act 2012, Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Personal Care at Home Act 2010, Equality Act 2010, Health Act 2009, Putting People First 2007 (Personalisation Agenda), Mental Health Act 2007, Children Act (1989, 2004), Data Protection Act 1998, sector skills standards, current legislation as relevant to Home Nation.**Factors**: discrimination; communication; resources; health and safety; risk; needs; resistance. **Strategies**: person-centred practice; communication; inclusion; decision-making; recognition of abilities/preference/choices; information sharing; complaints procedures; access to relevant services; advocacy; self-directed support; budget allocation. |
| **Learning outcome 2**  |
| **Risks**: choices; wellbeing; safety; security; duty of care; lack of shared understanding.**Tensions**: identified risks versus individual wishes; expectations versus resources; safeguarding.**Manage risks:** legislation, policies and procedures; health and safety; risk assessments; care planning; safeguarding; whistleblowing; partnership working. |
| **Learning outcome 3**  |
| **Roles and responsibilities**: policies/procedures; agreed ways of working; person-centred practice; promoting participation; communication; consultation; collaboration; observation; monitoring; review; risk management; care planning; resourcing; training. |

**Unit 03: Assessment grading criteria**

The table below shows what the learner must do to achieve each grading criterion. The learner must achieve all the criteria for a grade to be awarded. A higher grade may not be awarded before a lower grade has been achieved, although component criteria of a higher grade may have been achieved.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Learner name:** |  | **PIN:** |  | **Centre no:** |  | **ULN:** |  |

|  | **AC** | **Assessment grading criteria** | **Assessment of learning** | **Evidence record** |
| --- | --- | --- | --- | --- |
| **D1**  | 1.1 | Explain the importance of empowering individuals. | The explanation must demonstrate:an understanding of empowermentthe importance of empowering individuals. |  |
| **D2**  | 1.4  | Discuss strategies used to empower individuals. | The discussion must provide more than one appropriate strategy used to empower individuals.Relevant examples of the use of strategies from health and social care may be given to support the discussion.  |  |
| **D3** |  | Show evidence of reading or use of sources.Include an accurate reference list (bibliography). | There should be evidence of learners’ reading or use of sources.Learners must use a minimum of two (2) traceable references to support the discussion.Learners must include an accurate reference list (bibliography) at the end of the assessment task. |  |
| **C1** | 1.2  | Explain how legislation and standards inform practice when empowering individuals. | The explanation should demonstrate an understanding of both legislation and standards in relation to empowerment and of the differences and purposes of legislation and standards.The explanation should show how legislation and standards inform practice when empowering individuals.Relevant examples may be included to support the explanation. |  |
| **C2** | 2.1 | Describe risks involved when empowering individuals. | The description should demonstrate an understanding of risks which may occur when empowering individuals in health and social care.More than one risk should be described.Links to B2. |  |
| **C3** |  | Show evidence of reading or use of sources with referencing relevant to the explanations.Good use of vocabulary and grammar. | Use of referencing should show evidence of reading or use of sources.Vocabulary and grammar should be appropriate and accurate for purposes. |  |
| **B1** | 2.2 | Explain tensions when balancing the rights of the individual against the health and social care practitioner’s duty of care. | The detailed explanation should show an accurate understanding of both:the rights of the individual the health and social care practitioner’s duty of care.The detailed explanation should demonstrate an understanding of tensions that may occur when balancing the rights of the individual against the practitioner’s duty of care.More than one tension may be linked to a particular situation arising within the explanation.  |  |
| **B2** | 2.3  | Explain how to manage risks when empowering individuals. | The explanation should demonstrate an understanding of:the possible risks when empowering individualsways to manage the possible risks when empowering individuals in health and social care. More than one approach to managing risks must be considered. Examples may be given to demonstrate understanding of how to manage risks. Links to C2. |  |
| **B3** |  | Show evidence of reading or use of sources.Referencing supports discussion. | Use of reading or use of sources should be shown through a range of relevant referencing.Referencing should be used appropriately to support view or discussion. |  |
| **A1** | 1.3 | Analyse how factors affect the empowerment of individuals. | Identify relevant factors that affect the empowerment of individuals.An analysis should balance the effects of the identified factors and show the consequences of the effects of the identified factors on the empowerment of individuals. Examples may be given to support the analysis.  |  |
| **A2** |  | Show evidence of wider background reading or use of sources.Referencing supports discussion and evaluation. | Wider background reading should be evident or a wide range of source material should be used.  |  |
| **A\*1** | 3.1  | Critically evaluate the roles and responsibilities of the health and social care practitioner when empowering individuals. | Provide reasoned opinions or judgements from more than one perspective to demonstrate the roles and responsibilities of the health and social care practitioner when empowering individuals.Learners will need to be able to demonstrate the barriers and challenges that may be faced and consider how effectively practitioners empower individuals. |  |
| **A\*2** |  | Show evidence of a range of background reading or use of sources used selectively. | An extensive range of background reading or use of sources should be used selectively and cited appropriately. |  |

### Shape, logo, arrow  Description automatically generated**Unit 04 Anatomy and physiology for health and social care (F/617/6754)**

|  |  |
| --- | --- |
| Unit summary | The aim of this unit is to provide learners with knowledge and understanding of anatomy and physiology of the human body. The unit also provides the learner with knowledge and understanding of physiological disorders of the organ systems. |
| Guided learning hours  | 73 |
| Level | 3 |
| Mandatory/optional | Mandatory |
| Grading | This unit is graded A\*–D |
| Internally/externally assessed | Externally assessed |

|  |  |
| --- | --- |
| **Learner name:** |  |
| **Centre no:** |  |

|  |  |
| --- | --- |
| **Learning outcomes**The learner will: | **Scope of learning** |
| 1. Understand the structure and functions of the organ systems of the human body | 1.1 The structures and functions of the organ systems of the human body |
| 1.2 The relationship between the structure and function of the organ systems |
| 2. Understand homeostasis in the human body | 2.1 The process of homeostasis in the human body |
| 2.2 How homeostasis maintains the healthy functioning of the human body |
| 3. Understand signs and symptoms of physiological disorders that affect organ systems | 3.1 Physiological disorders that affect organ systems  |
| 3.2 The impact of physiological disorders on the wellbeing of **individuals** |
| 4. Understand how to obtain, record and report physiological measurements and factors which may affect changes in physiological measurements | 4.1 How to use equipment for measuring:temperatureblood pressurepulserespiratory rateoxygen saturation |
| 4.2 Factors which may affect changes in physiological measurements |
| 4.3 How to gain consent prior to obtaining physiological measurements |
| 4.4 The reasons for accurate and timely recording of physiological measurements |
| 4.5 How to report physiological measurements that may be a cause for concern |

**Unit 04 Anatomy and physiology for health and social care (F/617/6754) (cont’d)**

**Assessment guidance**

|  |
| --- |
| **Delivery and assessment** |
| This unit must be assessed in line with the Level 3 Extended Diploma in Health and Social Care (Adults) (Northern Ireland) Assessment Strategy and Principles.This unit must be taught in context of legislation and statutory guidance followed in Northern Ireland. |
| **Unit guidance** |
| **Individual(s)**: person(s) accessing services |

**Mandatory teaching content**

This content must be covered by Tutors and is subject to external assessment.

| **Learning outcome 1** |
| --- |
| **1.1 The structures and functions of the organ systems of the human body** **Skeletal system*** functions of the skeletal system:
* support
* protection
* attachment of muscles
* storage of calcium
* production of blood cells
* structure of the skeletal system:
* bone:
* compact and cancellous
* classification/type:
* long
* short
* flat
* irregular
* sesamoid
* bones:
	+ axial and appendicular skeleton
* learners need to be aware of the bones within the axial skeleton:
* bones of the head
* skull (eg cranium)
* bones of the neck
* cervical vertebrae (atlas and axis)
* bones of the spine
* 33 bones made up of thoracic
* lumbar vertebrae
* sacral vertebrae
* coccygeal vertebrae
* intervertebral discs
* bones of the torso
* ribs
* sternum
* clavicle
* scapula and pelvic girdle - ilium, ischium and pubis
* learners need to be aware of the bones within the appendicular skeleton:
* bones of the upper limbs
* humerus
* radius
* ulna
 |

**Unit 04 Anatomy and physiology for health and social care (F/617/6754) (cont’d)**

|  |
| --- |
| **Learning outcome 1 (cont’d)** |
| * bones of the hands
* carpals
* metacarpals
* phalanges
* bones of the lower limbs
* femur
* patella
* tibia and fibula
* bones of the feet
* tarsals
* metatarsals
* phalanges
* characteristics of a long bone:
* cartilage
* epiphyseal line
* medullary cavity
* periosteum
* types of joints:
* fibrous (eg immoveable)
* cartilaginous (eg slightly moveable)
* synovial (eg freely moveable)
* types of synovial joints:
* ball and socket
* hinge
* pivot
* saddle
* condyloid
* gliding
* characteristics of a synovial joint:
* synovial capsule
* synovial membrane
* synovial fluid
* joint cavity
* articular or hyaline cartilage
* ligaments and tendons

**Integumentary system*** layers of the skin:
* epidermis
* dermis
* subcutaneous
* learners need to be aware of the structural components of the dermis:
* papillary and reticular layer-blood capillaries
* sebaceous glands
* lymphatic capillaries
* hair
* sweat glands
* sensory and motor nerve endings
* collagen
* elastin fibres
 |

**Unit 04 Anatomy and physiology for health and social care (F/617/6754) (cont’d)**

|  |
| --- |
| **Learning outcome 1 (cont’d)** |
| * functions of the skin:
* protection
* temperature regulation
* sensation
* excretion
* vitamin D synthesis

**Muscular system*** learners need to be aware of the major muscles of the body
* muscles of the shoulder
* deltoid
* trapezius
* muscles of the arm
* biceps
* triceps
* muscles of anterior thorax
* pectorals
* diaphragm
* muscles of posterior thorax
* latissimus dorsi
* erector spinae
* muscles of the abdominal region
* rectus abdominis
* obliques
* muscles of the hip
* gluteus maximus
* iliopsoas
* muscles of the upper leg
* quadriceps
* hamstrings
* muscles of the lower leg
* gastrocnemius
* soleus
* muscle types and characteristics of each:
* smooth/visceral (eg involuntary)
* cardiac
* skeletal (eg voluntary)
* muscle action (contraction):
* sarcomeres
* actin
* myosin
* roles of muscles:
* agonist
* antagonist
* fixator
* synergist
* antagonistic pairs:
* flexion
* extension
* muscle fibre types – characteristics of each type:
* type 1
* type 2 (A and B)
 |

**Unit 04 Anatomy and physiology for health and social care (F/617/6754) (cont’d)**

|  |
| --- |
| **Learning outcome 1 (cont’d)** |
| **Nervous system*** structure of the central nervous system (CNS):
* brain
* spinal cord
* coordination of voluntary/involuntary activities
* structure and function of the peripheral nervous system:
* somatic
* autonomic
* sympathetic
* parasympathetic
* neurons:
* types of neuron
* motor (eg efferent)
* sensory (eg afferent)
* structure of a neuron
* cell body
* dendrites
* axons
* myelin sheath
* axon terminals
* mechanisms of transmission of an impulse:
* somatic, sensory and motor nerve pathways
* spinal reflex arc
* synaptic transmission

**Endocrine system*** the endocrine system and hormonal control
* the location and function of the hypothalamus and pituitary gland
* the function of key glands for hormone production:
* pituitary
* somatotrophin (eg human growth hormones (HGH))
* prolactin
* LH (eg luteinising hormone)
* follicle stimulating hormone (FSH)
* oxytocin
* antidiuretic hormone (ADH) (eg posterior pituitary stores and secretes ADH and oxytocin)
* thyroid
* thyroxine
* calcitonin
* ovaries
* oestrogen
* progesterone
* pancreas
* insulin
* glucagon
* adrenal gland
* adrenaline
* testes
* testosterone
 |

**Unit 04 Anatomy and physiology for health and social care (F/617/6754) (cont’d)**

|  |
| --- |
| **Learning outcome 1 (cont’d)** |
| **Cardiovascular system*** blood vessels:
* arteries and arterioles
* venules and veins
* capillaries
* heart structure:
* learners need to be aware of the major structures of the heart:
* superior vena cava
* inferior vena cava
* right atrium
* tricuspid valve
* right ventricle
* pulmonary valve
* pulmonary artery
* pulmonary vein
* left atrium
* bicuspid/mitral valve
* left ventricle
* semi-lunar valve
* aorta
* septum
* pericardium
* epicardium
* myocardium
* endocardium
* circulatory pathways:
* systemic
* pulmonary (eg double loop circuit)
* blood pressure:
* systolic
* diastolic
* normal ranges (eg measurements)
* structure and function of blood:
* plasma
* red blood cells
* white blood cells
* platelets

**Respiratory system*** passage of air through the respiratory system:
* mouth/nose
* pharynx
* epiglottis
* larynx
* trachea
* bronchi
* bronchioles
* alveoli
* lungs
* muscles of respiration
* diaphragm
* intercostals
 |

**Unit 04 Anatomy and physiology for health and social care (F/617/6754) (cont’d)**

|  |
| --- |
| **Learning outcome 1 (cont’d)** |
| * gaseous exchange/diffusion:
* removal of waste products
* control of ventilation
* breathing rate
* respiratory centres of the brain
* cellular respiration

**Immune/lymphatic system*** components of lymph system:
* vessels
* lymph nodes
* lymph
* location of major lymph nodes:
* neck
* armpits
* groin
* lymph organs:
* spleen
* thymus
* tonsils
* lymphocytes:
* T cells
* B cells
* phagocytes
* immune system and response:
* pathogens
* antigens
* antibodies

**Digestive system*** structure and function of alimentary canal:
* learners need to be aware of the structures of the alimentary canal
* mouth
* buccal cavity
* teeth
* tongue
* pharynx
* epiglottis
* stomach
* oesophagus
* cardiac sphincter
* pyloric sphincter
* small intestine-duodenum
* jejunum
* ileum
* villi
* large intestine
* ileocaecal valve
* caecum
* colon
* ascending
* transverse
* descending
 |

**Unit 04 Anatomy and physiology for health and social care (F/617/6754) (cont’d)**

|  |
| --- |
| **Learning outcome 1 (cont’d)** |
| * rectum
* anus
* anal sphincter
* peristalsis (eg mechanical digestion)
* chemical digestion:
* absorption
* role of enzymes in the digestive process:
* amylase
* protease
* lipase
* elimination of waste products

**Excretory/urinary system*** structure and function of the excretory/urinary system:
* kidneys
* nephrons (eg afferent and efferent arterioles)
* ureters
* bladder (eg transitional epithelium)
* urethra (eg differences in male and females)
* reabsorption
* elimination of waste products

**Reproductive system*** female:
* ovaries
* fallopian tubes
* uterus (eg perimetrium)
* cervix
* vagina
* ovulatory cycle
* male:
* testes
* vas deferens (eg vas/ductus)
* seminal vesicles
* scrotum
* prostate gland
* urethra
* penis

**1.2 Relationship between the structure and function of the organ systems**Levels of organisation and contribution of structure to function:* cells:
* basic building blocks of all tissues
* organelles:
* microscopic components of cells
* tissues:
* collection of cells that have a similar function
* organs:
* collection of tissues that form a similar function
 |

**Unit 04 Anatomy and physiology for health and social care (F/617/6754) (cont’d)**

|  |
| --- |
| **Learning outcome 1 (cont’d)** |
| * organ systems:
* two or more organs working together for a specific function
* relationships between the organ systems in maintaining healthy body functions
 |
| **Learning outcome 2**  |
| **2.1 The process of homeostasis in the human body*** definition of homeostasis
* autonomic process
* role of positive and negative feedback as a mechanism of regulation response to internal and external environment
* relationship between the nervous system and the endocrine system in gaining homeostatic control

**2.2 How homeostasis maintains the healthy functioning of the human body*** thermoregulation – maintains core body temperature:
* sweating
* shivering
* role of body hair
* hypo/hyperthermia
* osmoregulation:
* role of kidneys
* role of antidiuretic hormone (ADH)
* glucoregulation:
* pancreas
* insulin
* liver
* glucagon
* blood pressure:
* baroreceptors
* monitor arterial blood pressure
* resistance to blood flow (vasodilation or vasocontriction)
* chemoreceptors
* monitor oxygen
* carbon dioxide and hydrogen ions
* endocrine regulation
* failure of homeostatic balance
 |
| **Learning outcome 3**  |
| **3.1 Physiological disorders that affect organ systems*** skeletal system:
* arthritis (eg joints)
* integumentary system:
* eczema (eg skin)
* muscular system:
* muscular dystrophy (eg muscle contraction)
* nervous system:
* multiple sclerosis (eg neurone myelin sheath)
* cardiovascular system:
* cardiovascular disease (eg within the heart, blood vessel, adrenal glands)
* respiratory system:
* asthma (eg bronchioles in respiration)
 |

**Unit 04 Anatomy and physiology for health and social care (F/617/6754) (cont’d)**

|  |
| --- |
| **Learning outcome 3 (cont’d)** |
| * immune system:
* Human Immunodeficiency Virus (HIV) (eg Lymphocytes T and B cells)
* digestive system:
* Crohn’s disease

**3.2 The impact of physiological disorders on the wellbeing of individuals*** the wellbeing of the individual:
* holistic wellbeing
* physical wellbeing
* cognitive wellbeing
* emotional wellbeing
* social wellbeing
 |
| **Learning outcome 4**  |
| **4.1 How to use equipment for measuring:*** temperature (thermometer):
* oral
* ear
* underarm
* forehead
* rectal
* blood pressure (sphygmomanometer):
* manual
* automatic
* pulse (watch and pulse oximetry)
* respiratory rate (watch and stethoscope)
* oxygen saturation (pulse oximetry)

**4.2 Factors which may affect changes in physiological measurements*** physiological measurements:
* respiratory rate
* pulse
* blood pressure
* oxygen saturation
* temperature
* body mass index (BMI)
* factors:
* biological sex
* age
* life stages
* hormone levels
* testosterone
* oestrogen
* diet
* levels of activity
* high
* low
 |

**Unit 04 Anatomy and physiology for health and social care (F/617/6754) (cont’d)**

|  |
| --- |
| **Learning outcome 4 (cont’d)** |
| * ill health
* short-term illness
* long-term illness
* stress
* fight or flight mechanism
* medication
* statins
* beta-blockers
* paracetamol
* inhalers
* prednisolone

**4.3 How to gain consent prior to obtaining physiological measurements*** types of consent:
* voluntary
* informed
* capacity
* awareness of the importance of gaining consent prior to obtaining physiological measurements:
* professional approach
* explanation of procedure
* right to say no
* measurement feedback

**4.4 The reasons for accurate and timely recording of physiological measurements*** policies and procedures
* safeguarding
* monitoring
* changes in health
* care plan
* assists diagnosis

**4.5 How to report physiological measurements that may be a cause for concern*** know measurements that are within normal range, in order to recognise causes for concern
* follow relevant policies and procedures
* inform appropriate person:
* manager
* doctor
* senior nurse
* supervisor
* complete and maintain records
* confidentiality
 |

Unit submission form

|  |  |
| --- | --- |
| **Level 3 Extended Diploma in Health and Social Care (Adults) (Northern Ireland)**This form must be completed and attached to the assessment on submission. The unit assessment will not be accepted without this form. | **Learner** |
| Name:PIN:Site/Centre no. |

|  |
| --- |
| **Learner declaration** |
| **Unit title –** I declare that this is my own work and I understand that any grades are provisional until internal quality assurance has taken place.Learner signature: Date: |

|  |
| --- |
| **Comments: refer to assessment of learning** |
|  |

|  |
| --- |
| **Signatures** |
| Tutor: | Date: |
| Internal Quality Assurer:*(if chosen for sample)* | Date: |

### Completing the Record of Assessment Cycle

Purpose: an ongoing record of planning and feedback between Assessor and learner

This will be completed by all Assessors to give a clear audit trail of the planning and assessment cycle covering both knowledge and skills. This will include planning and feedback on the assessment process carried out throughout the assessment of the units, through to qualification. It needs to contain evidence of the planning of assessment and feedback on all assessed evidence.

The content of this document is mandatory for centres delivering a NCFE qualification, however centres may amend this form or create an alternative which complies with the content of the NCFE recording document.

|  |  |
| --- | --- |
| **Learner/Assessor details** | General information to identify the learner and Assessor.   |
| **Planned assessments**  | The Assessor to record detailed information for the learner about planning for assessments. This could be, for example, identifying evidence that could be provided by the learner to support knowledge learning outcomes or activities that could be undertaken by the learner in preparation for direct observations to meet skills/competence learning outcomes. It is up to centres and learners how they use this recording document or their centre devised alternative. Assessors and learners can plan several different activities at any one time and these can either all be included on one recording document or across several recording documents, depending on the centre and learner preference.  |
| **Units/Assessment criteria**  | The planned activities should be linked by the Assessor to the range of units or assessment criteria that could be covered by them. There is no necessity to identify down to assessment criteria level in advance if not appropriate for the specific planned activity, but units should always be identified.  |
| **Due date**  | The Assessor should agree a date for the planned activities to be completed, or part completed, by the learner. Both the learner and the Assessor should sign and date their agreement to the planned activities and timescales.  |
| **Feedback**  | Feedback should be written by the Assessor on learner progress towards the planned activities on the feedback section. This could be on just one occasion for the planned activities. Alternatively, the Assessor and learner may choose to review the planned activities on more than one occasion.  |
| **Date**  | To be signed and dated by both the learner and the Tutor/Assessor at the end of each feedback or review session.  |

### Record of Assessment Cycle

|  |  |
| --- | --- |
| **Learner name** |  |
| **PIN No** |  |
| **Assessor name** |  |

|  |  |  |
| --- | --- | --- |
| **Planned assessments** | **Unit/****Assessment****criteria** | **Due date** |
|  |  |  |
| **Assessor signature**  | **Date** | **Learner signature**  | **Date** |
|  |  |  |  |

|  |
| --- |
| **Feedback - Comment on the assessment criteria covered and units completed** |
|  |
| **Assessor signature** | **Date** | **Learner signature**  | **Date** |
|  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **Scheduled/Planned assessments** | **Unit/** **Assessment****criteria** | **Due date** |
|  |  |  |
| **Assessor signature**  | **Date** | **Learner signature**  | **Date** |
|  |  |  |  |

|  |
| --- |
| **Feedback - Comment on the assessment criteria covered and units completed** |
|  |
| **Assessor signature** | **Date** | **Learner signature**  | **Date** |
|  |  |  |  |

### ****Recommended assessment methods****

A recommended range of assessment methods has been identified, which may be used for the units in this qualification. This gives the opportunity for different learning styles and individual needs of learners to be taken into account.

If you are proposing to use an assessment method that is not included within the recommended list, you should contact your External Quality Assurer with full details of your proposed method. It will need formal approval from us before it can be used.

Each learner must generate evidence from appropriate assessment tasks which demonstrate achievement of all the learning outcomes associated with each unit. Grades are awarded for each unit.

Please refer to the notes relating to expert witness testimony and simulation which follow this table.

| **Ref** | **Assessment Method** | **Assessing****Competence/ Skills** | **Assessing****Knowledge/ Understanding** |
| --- | --- | --- | --- |
| A | Direct observation of learner by Assessor* by an Assessor who meets the relevant Sector Skills Council’s or other assessment strategy/principles and includes inference of knowledge from this direct observation of practice
 | Yes | Yes |
| B | Professional discussion | Yes | Yes |
| C | Expert witness testimony\** when directed by the Sector Skills Council or other assessment strategy/principles
 | Yes | Yes |
| D | Learner’s own work products | Yes | Yes |
| E | Learner log or reflective diary | Yes | Yes |
| F | Activity plan or planned activity | Yes | Yes |
| G | Observation of children, young people or adults by the learner | Yes | Yes |
| H | Portfolio of evidence* may include simulation\*\*
 | Yes | Yes |
| I | Recognition of prior learning | Yes | Yes |
| J | Reflection on own practice in real work environment | Yes | Yes |
| K | Written and pictorial information | No | Yes |
| L | Scenario or case study | No | Yes |
| M | Task set by NCFE (for knowledge learning outcomes) | No | Yes |
| N | Oral questions and answers | Yes | Yes |
| \* **Expert witness testimony** should be used in line with the relevant assessment strategy/principles. This method must be used with professional discretion, and only selected when observation would not be appropriate. Those providing an expert witness testimony must be lead practitioners with experience of making judgements around competence. The circumstances that may allow for an expert witness testimony include:* when assessment may cause distress to an individual, such as supporting a child with a specific need
* a rarely occurring situation, such as dealing with an accident or illness
* confidential situations – such as safeguarding strategy meetings – where it would be inappropriate for an Assessor to observe the learner’s performance.

\*\* **Simulation**. A learner’s portfolio of evidence may only include simulation of skills where simulation is permitted by the relevant assessment strategy/principles. |

### Level 3 Extended Diploma in Health and Social Care assessment strategy

The key requirements of the assessment strategy or principles that relate to all units in this qualification are summarised below. Individual assessment guidance must also be referred to.

**Knowledge learning outcomes**

* Assessors will need to be both occupationally knowledgeable and qualified to make assessment decisions
* Internal Quality Assurers will need to be both occupationally knowledgeable and qualified to make quality assurance decisions.

**Competence/Skills learning outcomes**

The skills learning outcomes, while linked to competence in the sector, are applied to learners’ knowledge and understanding. Therefore they do not require assessment in a real work environment.

* Assessors will need to be both occupationally knowledgeable and qualified to make assessment decisions
* Internal Quality Assurers will need to be both occupationally knowledgeable and qualified to make quality assurance decisions.

# Section 3

**Explanation of terms**

## Explanation of terms

This table explains how the terms used at Level 3 in the unit content are applied to this qualification (not all verbs are used in this qualification).

|  |  |
| --- | --- |
| Apply | Explain how existing knowledge can be linked to new or different situations in practice. |
| **Analyse** | Break the subject down into separate parts and examine each part. Show how the main ideas are related and why they are important. Reference to current research or theory may support the analysis. |
| **Clarify** | Explain the information in a clear, concise way. |
| **Classify** | Organise according to specific criteria. |
| **Collate** | Collect and present information arranged in sequence or logical order. |
| **Compare** | Examine the subjects in detail and consider the similarities and differences. |
| **Critically compare** | This is a development of compare where the learner considers the positive aspects and limitations of the subject. |
| **Consider** | Think carefully and write about a problem, action or decision. |
| **Demonstrate** | Show an understanding by describing, explaining or illustrating using examples. |
| **Describe** | Write about the subject giving detailed information in a logical way. |
| **Develop (a plan/idea which …)** | Expand a plan or idea by adding more detail and/or depth of information. |
| **Diagnose** | Identify the cause based on valid evidence. |
| **Differentiate** | Identify the differences between two or more things. |
| **Discuss** | Write a detailed account giving a range of views or opinions. |
| **Distinguish** | Explain the difference between two or more items, resources, pieces of information. |
| **Draw conclusions (which …)** | Make a final decision or judgement based on reasons. |
| **Estimate** | Form an approximate opinion or judgement using previous knowledge or considering other information. |
| **Evaluate** | Examine strengths and weaknesses, arguments for and against and/or similarities and differences. Judge the evidence from the different perspectives and make a valid conclusion or reasoned judgement. Reference to current research or theory may support the evaluation. |
| **Explain** | Provide detailed information about the subject with reasons showing how or why. Responses could include examples to support these reasons. |
| **Extrapolate** | Use existing knowledge to predict possible outcomes which might be outside the norm. |
| **Identify** | Recognise and name the main points accurately. (Some description may also be necessary to gain higher marks when using compensatory marking.) |
| **Implement** | Explain how to put an idea or plan into action. |
| **Interpret** | Explain the meaning of something. |
| **Judge** | Form an opinion or make a decision. |
| **Justify** | Give a satisfactory explanation for actions or decisions. |
| **Plan** | Think about and organise information in a logical way using an appropriate format. |
| **Perform** | Carry out a task or process to meet the requirements of the question. |
| **Provide** | Identify and give relevant and detailed information in relation to the subject. |
| **Review and revise** | Look back over the subject and make corrections or changes. |
| **Reflect** | Learners should consider their actions, experiences or learning and the implications of this for their practice and/or professional development. |
| **Select** | Make an informed choice for a specific purpose. |
| **Show** | Supply evidence to demonstrate accurate knowledge and understanding. |
| **State** | Give the main points clearly in sentences or paragraphs. |
| **Summarise** | Give the main ideas or facts in a concise way. |

# Section 4

**Additional information**

## Additional information

### Resource requirements

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

You will find templates for the forms listed below within this document which we have devised for your convenience; however, you may design your own forms which comply with the content of the templates.

* Record of Assessment Cycle
* Unit Submission Form

We have also provided notes to guide you when completing the Record of Assessment Cycle form. Learners must submit each unit for marking with the assessment of learning and the unit submission form.

If you need any advice on how to use any of these documents, please contact your EQA or speak to the External Quality Assurance team.

### Support for centres

**Key Facts**

This document outlines the key information of this qualification for the centre, learner and employer.

**Useful websites**

Centres may find the following websites helpful for information, materials and resources to assist with the delivery of this qualification:

| **Organisation** | **Website** |
| --- | --- |
| Acas | [www.acas.org.uk](http://www.acas.org.uk/) |
| We are Hourglass | [www.wearehourglass.org](https://www.wearehourglass.org/) |
| Royal National Institute for Deaf People | [www.rnid.org.uk](https://rnid.org.uk/) |
| Age UK | [www.ageuk.org.uk](http://www.ageuk.org.uk/) |
| Alzheimer’s Society | [www.alzheimers.org.uk](http://www.alzheimers.org.uk/) |
| Ann Craft Trust | [www.anncrafttrust.org](http://www.anncrafttrust.org/) |
| Ascert | [www.ascert.biz](http://www.ascert.biz/) |
| Aware | [www.aware-ni.org](https://www.aware-ni.org/)  |
| BHSCT – Belfast Health and Social Care Trust | [www.belfasttrust.hscni.net](http://www.belfasttrust.hscni.net/)  |
| British Sign Language | [www.british-sign.co.uk](https://www.british-sign.co.uk/) |
| CareKnowledge | [www.careknowledge.com](http://www.careknowledge.com/) |
| Care Quality Commission | [www.cqc.org.uk](http://www.cqc.org.uk/) |
| Carers UK | [www.carersuk.org](http://www.carersuk.org/) |
| Centers for Disease Control and Prevention | [www.cdc.gov](http://www.cdc.gov/) |
| Children and Young People Now | [www.cypnow.co.uk](http://www.cypnow.co.uk/) |
| Children and Young People’s Strategic Partnership | [www.cypsp.hscni.net](http://www.cypsp.hscni.net/)  |
| Citizens Advice | [www.citizensadvice.org.uk](http://www.citizensadvice.org.uk/) |
| Community Care | [www.communitycare.co.uk](http://www.communitycare.co.uk/) |
| Cruse Bereavement Care | [www.cruse.org.uk](http://www.cruse.org.uk/) |
| Dementia UK | [www.dementiauk.org](http://www.dementiauk.org/) |
| Department of Health and Social Care | [www.dh.gov.uk](http://www.dh.gov.uk/) |
| Disabled Living Foundation | [www.livingmadeeasy.org.uk](https://livingmadeeasy.org.uk/) |
| Equality and Human Rights Commission | [www.equalityhumanrights.com](http://www.equalityhumanrights.com/) |
| Families Leading Planning UK | [www.familiesleadingplanning.co.uk](http://www.familiesleadingplanning.co.uk/) |
| Family Support NI  | [www.familysupportni.gov.uk](http://www.familysupportni.gov.uk/)  |
| Foundation for People with Learning Disabilities | [www.learningdisabilities.org.uk](http://www.learningdisabilities.org.uk/) |
| General Medical Council | [www.gmc-uk.org](http://www.gmc-uk.org/) |
| GOV.UK | [www.gov.uk](http://www.gov.uk/) |
| Health and Safety Executive | [www.hse.gov.uk](http://www.hse.gov.uk/) |
| Health Education England | [hee.nhs.uk](https://hee.nhs.uk/) |
| In Control | [www.in-control.org.uk](http://www.in-control.org.uk/) |
| Mencap | [www.mencap.org.uk](http://www.mencap.org.uk/) |
| Mind | [www.mind.org.uk](http://www.mind.org.uk/) |
| National Careers Service | [www.nationalcareersservice.direct.gov.uk](https://nationalcareersservice.direct.gov.uk/) |
| National Children’s Bureau | [www.ncb.org.uk](http://www.ncb.org.uk/) |
| National Health Service | [www.nhs.uk](http://www.nhs.uk/) |
| National Institute for Health and Care Excellence | [www.nice.org.uk](http://www.nice.org.uk/) |
| National Society for the Prevention of Cruelty to Children | [www.nspcc.org.uk](http://www.nspcc.org.uk/) |
| Northern Ireland Social Care Council | [www.niscc.info](http://www.niscc.info/) |
| Northern Ireland Public Health Agency | [www.publichealth.hscni.net](http://www.publichealth.hscni.net/)  |
| Nursing and Midwifery Council | [www.nmc-uk.org](http://www.nmc-uk.org/) |
| Nursing Times | [www.nursingtimes.net](http://www.nursingtimes.net/) |
| Office for National Statistics | [www.ons.gov.uk](http://www.ons.gov.uk/) |
| Office for Standards in Education, Children’s Services and Schools | [www.gov.uk/government/organisations/ofsted](http://www.gov.uk/government/organisations/ofsted) |
| Patient | [www.patient.info](http://www.patient.info/) |
| UK Health Security Agency and Office for Health Improvement and Disparities | [www.gov.uk/government/organisations/office-for-health-improvement-and-disparities](http://www.gov.uk/government/organisations/office-for-health-improvement-and-disparities)  |
| Respond | [www.respond.org.uk](http://www.respond.org.uk/) |
| Rethink Mental Illness | [www.rethink.org](http://www.rethink.org/) |
| Royal College of Nursing  | [www.rcn.org.uk](http://www.rcn.org.uk/) |
| Royal National Institute of Blind People | [www.rnib.org.uk](http://www.rnib.org.uk/) |
| Safeguarding Board for Northern Ireland | [www.safeguardingni.org](https://www.safeguardingni.org/)  |
| Skills for Care | [www.skillsforcare.org.uk](http://www.skillsforcare.org.uk/) |
| Skills for Health | [www.skillsforhealth.org.uk](http://www.skillsforhealth.org.uk/) |
| Skills for Justice | [www.sfjuk.com](http://www.sfjuk.com/) |
| Social Care Information and Learning Services | [www.scils.co.uk](http://www.scils.co.uk/) |
| Social Care Institute for Excellence | [www.scie.org.uk](http://www.scie.org.uk/) |
| Stress Management Society | [www.stress.org.uk](http://www.stress.org.uk/) |
| The Fostering Network | [www.thefosteringnetwork.org.uk](https://www.thefosteringnetwork.org.uk/) |
| The Guardian | [www.theguardian.com](http://www.theguardian.com/) |
| The Makaton Charity | [www.makaton.org](http://www.makaton.org/) |
| The Royal Society for Public Health | [www.rsph.org.uk/](https://www.rsph.org.uk/) |
| The Tavistock and Portman NHS Foundaton Trust | [www.tavistockandportman.nhs.uk](https://tavistockandportman.nhs.uk/) |
| World Health Organization | [www.who.int](http://www.who.int/) |

### Learning resources

We offer a wide range of learning resources and materials to support the delivery of our qualifications. Please check the Qualifications page on [the](https://www.qualhub.co.uk/) NCFE website for more information and to see what is available for this qualification.

### Contact us

NCFE

Q6

Quorum Park

Benton Lane

Newcastle upon Tyne

NE12 8BT

Tel: 0191 239 8000\*

Fax: 0191 239 8001

Email: customersupport@ncfe.org.uk

Website: [www.ncfe.org.uk](http://www.ncfe.org.uk)

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