# **Qualification Specification**

NCFE CACHE Level 5 Diploma in Leadership and Management for Adult Care

QRN: 603/2422/3

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# Summary of changes

This section summarises the changes to this qualification specification since the last version.

Version	Publication Date	Summary of amendments
v1.0	September 2018	First publication
v1.1	December 2018	Minor amendments to wording: DILMAC2B <u>LO4:4.2</u> DILMAC5B <u>LO2:glossary of terms</u> DILMAC6B <u>LO1:1.2</u> and <u>LO3:glossary of terms</u> DILMAC9A <u>LO4:glossary of terms</u>

# **Section 1: General introduction**

## About this Qualification Specification

This Qualification Specification contains details of all the units and assessments learners will be required to complete to gain this qualification. It also contains extra information for the Assessor.

### How the qualification works

This qualification is made up of units each representing a small step of learning. This allows the qualification to be completed at the learner's own pace.

All of the units achieved can be 'banked'. This means that if learners want to take another qualification which includes the same units they do not have to take them again.

Each unit has:

- a level shows how difficult the unit is
- a **credit value** one credit represents about 10 hours' work
- a unit aim explains what is covered in the unit
- learning outcomes cover what you need to do (skills) or understand (knowledge). Additional guidance is included below the main learning outcome
- **content requirements** cover skills and knowledge that must be developed in each unit. This will provide information about what will need to be delivered/studied alongside the learning outcomes
- **assessment of learning** identifies how learner work will meet the requirements of each unit. There are examples of what could be included as portfolio evidence. This list is not exhaustive or mandatory.

## **Total Qualification Time/Guided Learning: Definitions**

Total Qualification Time (TQT) is the number of notional hours which represents an estimate of the total amount of time that could reasonably be expected to be required in order for a learner to achieve and demonstrate the achievement of the level of attainment necessary for the award of a qualification.

TQT comprises the following two elements:

- the number of hours which we have allocated to a qualification for guided learning
- an estimated number of hours a Learner will reasonably be likely to spend in preparation, study, or any other form of participation in education or training, but not under the immediate supervision of a Tutor or Assessor.

Guided Learning (GL)

- GL and TQT apply to the qualification as a whole.
  - We use GL to refer to the estimated guided learning hours at unit level.

## Recognition of Prior Learning (RPL)

Centres may recognise prior learning at their discretion if they are satisfied that the evidence provided meets the requirements of a qualification. Where RPL is to be used extensively (for a whole unit or more), advice must be given by the External Quality Advisor.

#### Qualification dates

Regulated qualifications have operational end dates and certification end dates.

We review qualifications regularly, working with sector representatives, vocational experts and stakeholders to make any changes necessary to meet sector needs and to reflect recent developments.

If a decision is made to withdraw a qualification, we will set an operational end date and provide reasonable notice to our Centres. We will also take all reasonable steps to protect the interest of learners.

An operational end date will only show on the Ofqual Register of Regulated Qualifications <u>register.ofqual.gov.uk</u> and on our website if a decision has been made to withdraw a qualification. After this date, we can no longer accept learner registrations. However, certification is allowed until the certification end date so that learners have time to complete any programmes of study. The certification end date will only show on the Ofqual Register once an operational end date has been set. After this date, we can no longer process certification claims.

#### **Understanding learning outcomes**

There are two main types of learning outcome:

- **skills** that can be performed
- **knowledge** that can be learnt.

Sometimes they can cover a combination of the two.

#### Competence-/skills-based learning outcomes:

• Usually begins with a verb. The assessment requirements usually show that the evidence could be observable within a real work environment. Other methods may be applied, please see chart in Assessment Guidance section. All evidence must be based on the learner's experience in a real work environment.

#### Knowledge-based learning outcomes:

• Begin with 'Know', 'Understand' or 'Know how to'.

#### Plagiarism

#### Making use of our websites

Our websites are maintained on a regular basis and this is where the most up-to-date documents can be found. We strongly advise that these are used as a resource on an ongoing basis to ensure you always have the most current information.

All our qualification documents are version controlled, allowing you to check for updates or revisions.

#### The Public Website

Our public website address is: <u>www.cache.org.uk</u>. The website contains information about all our qualifications, and also a link to our Qual Hub <u>www.qualhub.co.uk</u> which contains:

- Key Facts
- Qualification Specifications
- other support materials

There are also some other key documents that can be referred to when required. For example:

- Complaints Policy
- Enquiries and Appeals Policy
- Diversity and Equality Policy.

It also contains regular news updates and case studies and links to websites from other organisations that might be of interest.

#### The Centre Secure Website

More specific information to support Centre delivery can be found in our member's area on Qual Hub. This site is for Approved Centres only.

To access the members area on Qual Hub use the log in using the details provided by the Centre administrator. Plagiarism means claiming work that has been copied from someone or somewhere else to be your own. All the work you submit must be your own and not copied from anyone else unless you clearly reference the source of your information. Your Tutor will explain how to provide a reference list that shows where you found your information. If your Centre discovers evidence that your work is copied from elsewhere, it will not be accepted and you may be subject to your Centre's disciplinary procedure or ours. If this happens you will have to submit an additional piece of work for assessment. We will be notified of any cases of plagiarism.

#### Buying and selling assignments

Offering to buy or sell assignments is not allowed. This includes using sites such as eBay. If this happens we reserve the right not to accept future entries from you.

### Equal opportunities

We fully support the principle of equal opportunities and oppose all unlawful or unfair discrimination on the grounds of ability, age, colour, culture, disability, domestic circumstances, employment status, gender, marital status, nationality, political orientation, racial origin, religious beliefs, sexual orientation and social background. We aim to ensure that equality of opportunity is promoted and that unlawful or unfair discrimination, whether direct or indirect, is eliminated both in its own employment practices and in access to its qualifications. A copy of CACHE's Diversity and Equality policy is available on the website.

#### Diversity, access and inclusion

Our qualifications and associated assessments are designed to be accessible, inclusive and non-discriminatory. We regularly evaluate and monitor the six diversity strands (gender, age, race, disability, religion, sexual orientation) throughout the development process as well as delivery, external moderation and external assessment processes of live qualifications. This ensures that positive attitudes and good relations are promoted, discriminatory language is not used and our assessment procedures are fully inclusive.

Learners who require reasonable adjustments or special consideration should discuss their requirements with their Tutor, who should refer to our Reasonable Adjustments and Special Considerations Policy for guidance. For more information on the Reasonable Adjustments and Special Considerations Policy, please see our dedicated qualifications website <u>www.qualhub.co.uk</u>.

# Section 2: About this qualification

## Introduction to the qualification

This qualification, which replaces the Level 5 Diploma in Leadership for Health and Social Care and Children and Young People's Services, is nationally recognised and is based on the Health and Social Care National Occupational Standards (NOS) and the Skills for Care Management Induction Standards (MIS). The NOS, MIS, assessment principles and qualification structure are owned by the Sector Skills Council, Skills for Care.

The aim of the Level 5 Diploma in Leadership and Management for Adult Care is to guide and assess the knowledge and skills relating to leadership and management within adult care. Learners undertaking this qualification will be working in a managerial role in a variety of adult care settings.

As learners engage with the units of this qualification, they will learn more about how to develop leadership and management skills. As a leader in adult care, the learner will become an important role model for others, inspiring staff and raising aspirations. Learners will be able to respond to drivers in adult care through strong leadership, values base, innovation, and business insight. We sincerely hope that learners will enjoy their study of the Level 5 Diploma in

Leadership and Management for Adult Care, and find that they are able to reflect on their own practice, implement changes that improve experiences and outcomes for individuals, and lead others within adult care services.

Qualification summary						
Title	NCFE CACHE Level 5 Diploma in Leadership and Management for Adult Care					
Qualification number	603/2422/3					
Aim	This qualification provides learners with the knowledge and skills needed to manage, practise and lead others in adult care provision. Learners will acquire and use skills of leadership, mentoring, coaching and reflection through work-based learning opportunities.					
	This qualification is most suitable for those working in a managerial role in adult care settings who are looking to progress their career. It is also appropriate for managers who have not yet achieved a vocational qualification at Level 5.					
<b>Purpose</b> Ofqual code and	D. Confirm occupational competence and/or 'licence to practice'.					
description (where applicable)	D1: Confirm competence in an occupational role to the standards required.					
Total Qualification Time (hours)	900					
Guided Learning (hours)	720					
Credit value	90					
Minimum age of learner	Learners must be at least 19 years of age. Centres may apply additional entry requirements for learners at their own discretion.					
Age ranges covered by the qualification	18+					
Real work environment (RWE) requirement / recommendation	Learners will need to be working in a managerial role in an appropriate setting to be able to study for the Level 5 Diploma in Leadership and Management for Adult Care.					

Apprenticeship frameworks / standards	Apprenticeship standard for Leader in Adult Care					
Rules of	Learners must achieve the 20 mandatory units (75 credits) and the remaining 15 credits from the optional units to achieve a minimum of 90 credits in total.					
combination	For Apprenticeships, the latest standards document should be consulted to ensure that all mandatory qualifications, units, on-the-job hours and Apprenticeship conditions are achieved and evidenced.					
	Learners could progress to a variety of management roles in adult care or to further or higher education.					
Progression	Learners could progress to the following job roles and responsibilities:					
including job roles (where applicable)	<ul> <li>Manager</li> <li>Deputy Manager</li> <li>Assistant Manager</li> <li>Care Broker</li> <li>Case Manager.</li> </ul>					
Recommended assessment methods	Portfolio of evidence					
Additional assessment requirements	All units must be assessed in line with the Skills for Care and Development Assessment Principles.					
Grading system	The qualification will be graded Pass or Refer and all of the assessment requirements within the assessment of learning must be achieved in order to obtain a pass.					
How long will it take to complete?The qualification can usually be completed with months.						
Entry requirements / recommendations	There are no formal entry requirements for this qualification, but learners will need to be at least 19 years of age. It is also recommended that they hold a Level 3 or above qualification in a related area. CACHE does not set any other entry requirements, but Centres may have their own guidelines.					

#### **Qualification structure**

In order to show links between units and aid holistic delivery and assessment we have structured the mandatory units around the following eight themes:

- Theme 1: Leadership and management roles and responsibilities
- Theme 2: Governance and quality assurance
- Theme 3: Working with others
- Theme 4: Person-centred practice for positive outcomes
- **Theme 5**: Professional development, supervision and performance management
- Theme 6: Safe ways of working, protection and risk
- Theme 7: Managing and developing self
- Theme 8: Vision and strategy

Please see the unit list for details about which units are grouped under each of the themes.

Learners must achieve:

• 20 mandatory units (75 credits) and the remaining 15 credits from the optional units to achieve a minimum of 90 credits.

# **Section 3: Units**

	Unit achievement log –Level 5 Diploma in Leadership and Management for Adult Care									
Mandatory	Mandatory units									
Unit ref.	Unit no.	Unit title	Unit type	Level	GL	Credit	Notes			
Theme 1: Lea	dership and m	anagement roles and responsibilit	ies	I						
DILMAC 1A	L/616/1027	Leadership and management in adult care	Knowledge / Skills	5	45	6				
DILMAC 1B	R/616/1028	Team leadership in adult care	Skills	5	25	3				
DILMAC 7A	L/616/1030	Resource management in adult care	Knowledge	5	35	4				
Theme 2: Gov	vernance and q	uality assurance			<b></b>	·				
DILMAC 2A	R/616/1031	Governance of adult care	Knowledge	5	35	4				
DILMAC 2B	M/616/1036	Regulatory processes for adult care	Knowledge	5	40	5				

Unit ref.	Unit no.	Unit title	Unit type	Level	GL	Credit	Notes		
Theme 3: Wo	Theme 3: Working with others								
DILMAC 3A	T/616/1037	Communication and information management in adult care	Knowledge / Skills	5	35	4			
DILMAC 4A	F/616/1039	Partnership working in adult care	Knowledge / Skills	5	35	4			
Theme 4: Per	son-centred pr	actice for positive outcomes	•			<u> </u>			
DILMAC 5A	F/616/1042	Outcomes-based person-centred practice in adult care	Knowledge / Skills	5	40	5			
DILMAC 5B	Y/616/1046	Equality, diversity and inclusion in adult care	Knowledge / Skills	5	15	2			
DILMAC 5C	K/616/1049	Continuous improvement in adult care	Skills	5	25	3			
Theme 5: Pro	Theme 5: Professional development, supervision and performance management								
DILMAC 6A	A/616/1055	Professional development in adult care	Knowledge	5	25	3			
DILMAC 6B	R/616/1059	Supervision and performance management in adult care	Knowledge / Skills	5	40	5			

Unit ref.	Unit no.	Unit title	Unit type	Level	GL	Credit	Notes			
Theme 6: Safe	Theme 6: Safe ways of working, protection and risk									
DILMAC 8A	D/616/1064	Safeguarding and protection in adult care	Knowledge / Skills	5	40	5				
DILMAC 8B	M/616/1070	Health and safety in adult care	Knowledge / Skills	5	15	2				
DILMAC 8C	D/616/1078	Risk-taking and risk management in adult care	Knowledge / Skills	5	35	4				
DILMAC 8D	Y/616/1080	Managing concerns and complaints in adult care	Knowledge / Skills	5	25	3				
Theme 7: Mar	naging and dev	elopina self			L					
DILMAC 9A	K/616/1083	Manage self in adult care	Knowledge / Skills	5	35	4				
Theme 8: Visi	ion and strateg	V		•		•				
DILMAC 10A	T/616/1085	Decision-making in adult care	Knowledge / Skills	5	25	3				
DILMAC 11A	F/616/1087	Entrepreneurial skills in adult care	Knowledge / Skills	5	20	3				
DILMAC 11B	J/616/1088	Innovation and change in adult care	Knowledge	5	20	3				

Unit ref.	Unit no.	Unit title	Unit type	Level	GL	Credit	Notes		
Optional units									
				_	0.5				
DILMAC 12	J/616/1141	Advocacy in adult care	Knowledge / Skills	5	25	3			
DILMAC 13	R/616/1143	Assistive technology in adult care	Knowledge / Skills	5	15	2			
DILMAC 14	H/616/1146	Business development for adult care	Knowledge	5	25	3			
DILMAC 15	K/616/1147	Clinical skills in adult care	Knowledge / Skills	5	35	4			
DILMAC 16	T/616/1149	Coaching and mentoring in adult care	Knowledge / Skills	5	25	3			
DILMAC 17	A/616/1153	Group living in adult care	Knowledge / Skills	5	25	3			
DILMAC 18	J/616/1155	Induction in adult care	Knowledge / Skills	5	25	3			
DILMAC 19	R/616/1157	Mental capacity in adult care	Knowledge	5	25	3			

Unit ref.	Unit no.	Unit title	Unit type	Level	GL	Credit	Notes
DILMAC 20	Y/616/1158	Recruitment, selection and retention in adult care	Knowledge	5	25	3	
DILMAC 21	R/616/1160	Research in adult care	Knowledge / Skills	5	55	8	
DILMAC 22	H/616/1163	Specialist areas of care	Knowledge / Skills	5	40	5	
DILMAC 23	K/616/1164	Sexuality and sexual health in adult care	Knowledge / Skills	5	25	3	
DILMAC 24	T/616/1166	Transitions in adult care	Knowledge / Skills	5	30	4	

## For each unit the following information has been provided:

Unit title	Provides a clear, concise explanation of the content of the unit.
Organisation unit reference number	The unique number assigned by the owner of the unit.
Unit reference	The unique reference number given to each unit at qualification approval by Ofqual.
Unit level	Denotes the level of the unit within the framework.
Unit credit value	The value that has been given to the unit based on the expected learning time for an average learner.
Unit aim	Provides a brief outline of the unit content.
Learning outcomes	A statement of what a learner will know, understand or be able to do, as a result of a process of learning.
Content requirements	Contains the scope of knowledge and understanding that must be delivered within each learning outcome. Tutors may wish to include other relevant content during delivery.
Unit glossary of terms	Explains the terms used within the unit content.
Assessment of learning	A description of the requirements a learner must achieve to demonstrate that a learning outcome has been met.
Examples of evidence	A list of suggested evidence (activities and work products) to facilitate assessment.
Unit guided learning hours	The average number of hours of supervised or directed study time or assessment required to achieve a qualification or a unit of a qualification.

Explanation of terms used at Level 5: (not all verbs are used in this qualification)		
Act (as a role model)	Serve as a model in a particular behavioural or social role for another person to emulate.	
Adapt (approaches)	Modify, adjust, make suitable for purpose.	
Adhere to	Follow, keep, maintain, respect, abide by, give support to, eg adhere to a strict code of practice.	
Analyse	Break the subject or complex situations into separate parts and examine each part in detail, identify the main issues and show how the main ideas are related to practice and why they are important (reference to current research or theory may support the analysis).	
Apply (standards)	Explain how existing knowledge, practices, standards etc can be linked to new or different situations.	
Ascertain	Find out for certain.	
Assess	Estimate and make a judgement.	
Compare	Examine the subjects in detail, looking at similarities and differences.	
Compare and contrast	Examine the subjects in detail, looking at similarities and differences, and distinguish between (identify) striking differences.	
Critically review	Revise, debate and judge the merit of.	
Clarify	Explain the information in a clear, concise way, showing depth and understanding.	
Critically analyse	This is a development of 'analyse' which explores limitations as well as positive aspects of the main ideas in order to form a reasoned opinion.	
Critically evaluate	Examine strengths and weaknesses, arguments for and against and/or similarities and difference; judge the evidence and discuss the validity of claims from the opposing views and produce a convincing argument to support the conclusion or judgement.	
Collaborate (L7)	Work jointly with.	

Describe	Provide an extended range of detailed information about the topic or item in a logical way.		
Develop	Identify, build and extend a topic, plan or idea.		
Distinguish between	Discuss identified differences between more than one item, product, object or activity.		
Demonstrate	Apply skills in a practical situation and/or show an understanding of the topic.		
Explain	Apply reasoning to account for how something is or to show understanding of underpinning concepts (responses could include examples to support the reasons).		
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 judgment; apply current research or theories to support the evaluation when applicable.		
Establish (L5 and L6)	Set up on a permanent basis; get generally accepted; place beyond dispute.		
Empower	Equip or supply with an ability; enable or permit.		
Enable	Supply with the means, knowledge, or opportunity; make able.		
Facilitate (L6)	Make easier; assist the progress of.		
Formulate (L5, L6 and L7)	Draw together; set forth in a logical way; express in systematic terms or concepts.		
Give constructive feedback	Provide commentary which serves to improve or advance; be helpful.		
Identify	Ascertain the origin, nature, or definitive characteristics of.		
Implement (L5 and L6)	Put into practical effect; carry out.		
Investigate	Detailed examination or study; enquire systematically.		
Intervene effectively	Change an outcome.		
Initiate	Originate/start a process.		
Justify	Give a comprehensive explanation of the reasons for actions and/or decisions.		

Monitor	Maintain regular surveillance.		
Mentor	Serve as a trusted counsellor or teacher to another person; help others succeed.		
Negotiate	Discuss with a view to finding an agreed settlement.		
Resolve	Solve; settle; explain.		
Research (L5 and L6)	A detailed study of a subject to discover new information or reach a new understanding.		
Review	Revisit and judge the merit of.		
Recognise	Acknowledge the validity of.		
Represent views of	Act as an advocate; speak, plead or argue in favour of.		
Review and revise	Revisit, judge the merit of, and make recommendations for change.		
Reflect on	Consult with oneself, recognising implications of current practice with a view to changing future practice.		
Recommend	Revisit and judge the merit of; endorse a proposal or course of action; advocate in favour of.		
Summarise	Select the main ideas, argument or facts and present in a precise, concise way.		
Signpost	Point the way; indicate.		
Support	Strengthen, support or encourage; corroborate; give greater credibility to.		
Set objectives (L6)	Identify the outcomes required.		
Secure	Make safe; obtain (information or evidence).		
Triangulate (L7)	Identify three aspects to ensure validity.		
Work in partnership	Work in association with two or more persons (this may include stakeholders, service users and/or carers.		

Theme 1: Leadership and management roles and responsibilities

DILMAC 1A: Leadership and management in adult care				
Unit reference: L/616/1027	Unit level: 5	Credit: 6	Guided Learning: 45 hours	

**Unit aim:** The aim of this unit is to provide learners with the knowledge, understanding and skills required to lead and manage others within adult care settings.

Learning Outcome 1: Understand the application of theories of leadership and management.		
Content requirements for Learning Outcome 1:		
	Knowledge that learners must develop in this unit.	
1.1. Key theori	es of leadership and management:	
	relevant theories of management and leadership (eg strategic and operational management, relationship management, change management, transactional and transformational).	
1.2. How theoretical models of leadership and management are applied to practice:		
	governance leadership and management styles shared vision and strategy positive organisational culture improving services best practice and positive outcomes review and respond to policy drivers performance management self-management managing change influencing others	

- co-production •
- delegation.

- 1.3. Potential conflicts which may occur when applying theoretical models of leadership and management:
  - professional values, behaviours and objectives
  - practice and regulatory requirements
  - evolving sector
  - the pressures on services (eg an ageing population and increase in co-morbidities)
  - corporate social responsibility on business practice
  - funding and resource limitations.
- 1.4. How to address potential conflicts which may occur when applying theoretical models of leadership and management:
  - policies and procedures
  - situational management
  - evidence based approach
  - inclusive approach to management, service delivery and partnership working
  - outcomes-focused and person-centred approach to service delivery
  - champion integration and new models of care delivery
  - open, honest and transparent culture and communications
  - reflective practice.

Learning Outcome 2: Understand leadership and management in adult care settings

#### Content requirements for Learning Outcome 2:

Knowledge that learners must develop in this unit.

2.1. The impact of national policy drivers on leadership and management in adult care services:

- personalisation
- co-production
- integration
- information management
- planning and review of services, processes and working practices
- outcomes-focused
- positive risk management
- digital technology
- assisted living services and assistive technologies
- prevention, early intervention and reduction
- reablement and rehabilitation services and support
- well-being
- resources.

- 2.2. Leadership and management skills:
  - leadership skills:
    - persuasion
      - inspiration and motivation
    - problem solving
    - innovation
    - relationship building
    - communication
    - negotiation
    - empathy
    - creative thinking
    - reflection.
  - management skills:
    - organisation
    - problem solving
    - analytical
    - planning
    - coordination
    - administration
    - time management
    - resource management
    - communication
    - delegation
    - goal setting
    - reflection.

2.3. Why managers in adult care settings need both leadership and management skills:

- leadership and management as systems of action
- the correlation between leadership and management functions
- the interdependency between leadership and management roles.

2.4. Why leadership and management styles may need to be adapted to manage different situations:

- different leadership and management styles (situational, transformational, systems)
- principles of leadership and management styles (eg flexibility, adaptability, managing change, continuum of leadership and management, motivation)
- factors and/or situations that influence the choice of leadership or management style.

2.5. The relationship between leadership and the values and culture of an organisation:

- how leadership styles affect organisational values and culture
- importance of positive workplace values and culture to organisational performance
- importance of aligning leadership and organisational values and culture
- approaches to develop and maintain positive workplace values and

#### culture.

- 2.6. How to establish a culture of continual learning and development and the importance of learning from experience:
  - workforce development
  - performance management
  - duty of candour
  - learning from serious case reviews
  - evidence-based practice
  - reflective practice

vision and its impact.

- evaluation and service improvement
- mentoring and coaching in the workplace.

Learning Outcome 3: Lead commitment to a vision for the service
Content requirements for Learning Outcome 3:
Skills that learners must develop in this unit.
3.1. Communicate own ideas and enthusiasm about the service and its future in a way which engages <b>others</b> .
3.2. Support stakeholders within and beyond the organisation to be aware of the

3.3. Build support for the vision and ensure it is shared and owned by those who will be implementing and communicating it.

## Unit glossary of terms

**Co-production**: Regarding people who use social care, their families and carers as equal partners in decision-making, recognising that people who use support services and their families have expertise that can be used to help make services better not only for themselves but for others too.

Others may include:

- individuals
- carers, family members and friends
- advocates
- paid workers
- other professionals.

**Partnership working**: Working effectively together with professionals, agencies and organisations to enhance well-being and support positive and improved outcomes.

**Well-being**: Well-being is a broad concept relating to the following areas in particular: personal dignity, physical and mental health, emotional well-being, protection from abuse and neglect, control over day-to-day life (including control over care and support and the way it is provided), participation in work, education or training, participation in recreation, social and economic well-being, and domestic, family and personal relationships.

# Producing evidence to meet the assessment requirements

#### Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Critique two (2) key theories of leadership and management. The information provided must include:	
<ul> <li>a definition of leadership and management</li> <li>a description of leadership and management styles/approaches.</li> </ul>	
1.2. Describe how theoretical models of leadership and management are applied to practice through two (2) examples of effective leadership and management models in adult care provision.	
1.3. Refer to evidence provided in 1.2 and explain potential conflicts which may occur when applying the identified theoretical models of leadership and management.	
Undertake a SWOT analysis for two (2) additional theoretical models of leadership and management. Explain any potential conflicts that may occur in:	
<ul><li> adult care provision</li><li> own setting.</li></ul>	
1.4. Refer to the evidence provided for 1.3 and propose strategies to address four (4) potential conflicts which may occur when applying identified theoretical models of leadership and management.	
2.1. Evaluate the impact of two (2) national policy drivers on leadership and management in:	
<ul><li>adult care services</li><li>own setting.</li></ul>	

Assessment requirements	Evidence record eg page number and method
2.2. Describe leadership and management skills.	
2.3. Analyse the interdependencies of leadership and management to show why managers need both skills sets.	
Evidence may include:	
<ul> <li>how leadership and management skills are deployed in practice</li> <li>skills mapping exercise identifying strengths and areas for improvement.</li> </ul>	
2.4. Explain why leadership and management styles may need to be adapted to manage different situations.	
Evidence may include how different leadership and management styles are applied to practice.	
2.5. Describe the relationship between effective leadership and the values and culture in own setting.	
2.6. Discuss how to establish a culture of continual learning and development in own setting and the importance of learning from experience.	
3.1. Communicate own ideas and enthusiasm about the service and its future in a way which engages others.	
3.2. Support stakeholders within and beyond the organisation to be aware of the vision and its impact.	
3.3. Build support for the vision and ensure it is shared and owned by those who will be implementing and communicating it.	
Learners will need the sign-off section declaring own work.	

#### Examples of evidence for the learner portfolio

- action planning and quality improvement plans
- business review/planning
- collaborative working
- communication strategies
- community meetings
- decision-making processes and involvement
- examples of change management
- individuals, carer and family forums/meetings
- management reports and presentations
- networking activity
- operational review/planning
- partnership activity
- policy and procedural development
- self-assessment and quality improvement plans
- service re-design
- staff induction
- statement of purpose
- strategic and operational management meeting records
- supervision and appraisal
- team and personal objectives
- team meetings
- training, development and presentations
- value-based recruitment procedures
- vision and mission statements
- workforce planning
- role modelling.

Learner and Assessor sign-off				
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.			
PIN:	Learner signature:			
Centre no:	Date:			
ULN:				
Assessor name:	Assessor sign-off of completed unit: DILMAC 1A			
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.			
	Assessor signature:			
	Date:			
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.				

DILMAC 1B: Team leadership in adult care					
Unit reference: R/616/1028	Unit level: 5	Credit: 3	Guided Learning: 25 hours		
<b>Unit aim:</b> The aim of this unit is to provide learners with the knowledge,					

understanding and skills required to lead a team within adult care settings.

### Learning Outcome 1: Lead own team.

### Content requirements for Learning Outcome 1:

Skills that learners must develop in this unit.

- 1.1. Adapt leadership styles to reflect different stages in the team's development.
- 1.2. Establish trust and accountability within the team.
- 1.3. Build team commitment to the service and its values by consistently demonstrating own commitment and expressing own vision.
- 1.4. Develop, implement and review strategies to support a positive **values-based** culture in the team.
- 1.5. Model and promote team practice that champions equality, diversity and inclusion and challenges discrimination and exclusion.

#### Learning Outcome 2: Manage team work

#### Content requirements for Learning Outcome 2:

Skills that learners must develop in this unit.

- 2.1. Facilitate the participation of team members in agreeing team objectives.
- 2.2. Encourage creativity and innovation when planning how to meet team objectives and agree a team plan.
- 2.3. Agree roles, responsibilities and personal work objectives with team members taking account of their individual skills, interests, knowledge, expertise and development needs.
- 2.4. Support team members to work towards personal and team objectives and monitor progress.
- 2.5. Provide constructive feedback on performance to:
  - individual team members
  - the team.
- 2.6. Work with team members to address any issues with performance and identify opportunities for continuing development.
- 2.7. Recognise progress towards team and personal work objectives.

### Unit glossary of terms

**Constructive feedback**: Feedback that addresses both positive and negative considerations expressed in a way that encourages reflection and change.

Values-based: Based on person-centred values which include:

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

# Producing evidence to meet the assessment requirements

#### Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Adapt leadership styles to reflect different stages in the team's development.	
Evidence may include:	
<ul> <li>application of theoretical models of team development (eg Belbin's team roles, Tuckman's team and group development theory)</li> <li>use of appropriate leadership styles for different stages of team development.</li> </ul>	
1.2. Establish trust and accountability within the team.	
1.3. Build team commitment to the service and its values by consistently demonstrating own commitment and expressing own vision.	
1.4. Develop, implement and review strategies to support a positive values-based culture in the team.	
<ul><li>Evidence may include:</li><li>how own setting supports a positive values-based culture in the team.</li></ul>	
1.5. Model and promote team practice that champions equality, diversity and inclusion and challenges discrimination and exclusion.	
2.1. Facilitate the participation of team members in agreeing team objectives.	
2.2. Encourage creativity and innovation when planning how to meet team objectives and agree a team plan.	

Assessment requirements	Evidence record eg page number and method
2.3. Agree roles, responsibilities and personal work objectives with team members taking account of their individual skills, interests, knowledge, expertise and development needs.	
2.4. Support team members to work towards personal and team objectives and monitor progress.	
2.5. Provide <b>constructive feedback</b> on performance to:	
<ul><li>individual team members</li><li>the team.</li></ul>	
2.6. Work with team members to address any issues with performance and identify opportunities for continuing development.	
2.7. Recognise progress towards team and personal work objectives.	
Learners will need the sign-off section declaring own work.	

#### Examples of evidence for the learner portfolio

- appraisal and end-of-year reviews
- championing equality, diversity and inclusion
- change management
- coaching and mentoring activity
- conflict management
- continuous improvement
- continuous professional development (CPD) activity and dissemination
- effective delegation including role modelling, distributed leadership and empowerment strategies
- feedback from individuals and others
- how individual / team performance is celebrated
- inspection reports and audits
- use of leadership and management styles
- organisational and team planning activity
- peer and self-evaluations including examples of when practice has been challenged and improved
- performance management
- performance observations and feedback
- performance, capability management and disciplinary records
- policy and procedural development
- quality improvement plans
- recruitment processes
- reporting lines evidencing roles / responsibilities and accountability
- role modelling
- skills gap analysis
- staff induction
- suggestions box
- supervision and appraisal
- team collaboration and contribution to strategic and operational vision and plans
- team collaboration with regards to quality (inspection reports and subsequent planning)
- team meetings
- values-based recruitment
- work in collaboration with others to agree a team plan
- work with experienced staff
- workforce development.

Learner and Assessor sign-off				
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.			
PIN:				
	Learner signature:			
Centre no:	Date:			
ULN:				
Assessor name:	Assessor sign-off of completed unit: DILMAC 1B			
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.			
	Assessor signature:			
	Date:			
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.				

DILMAC 7A: Resource management in adult care					
Unit reference: L/616/1030	Unit level: 5	Credit: 4	Guided Learning: 35 hours		
<b>Unit aim:</b> The aim of this ur required to effectively mana	•		nowledge and understandin		
Learning Outcome 1: Und	lerstand princi	oles for effect	ive resource management		
Content r	equirements fo	or Learning O	utcome 1:		
Knowledg	ge that learners	must develop i	n this unit.		
1.1. The impact of national and management in rel		gies and priorit	ies on resource planning		
<ul> <li>provis</li> <li>insura cause</li> <li>Natio</li> <li>comn</li> <li>perso</li> <li>indivi</li> <li>outco</li> <li>demondeterri</li> <li>preve</li> <li>integri</li> <li>multi-</li> <li>workf</li> <li>workf</li> <li>workf</li> <li>orgar</li> <li>safeg</li> <li>lone v</li> <li>perso</li> </ul>	urces ative and regula sion of services ance and liabilitie es, loss or dama anal Minimum W nissioning on-centred service dual budgets an ome-focused ser graphics, socio- minants of health ention, early inte ration of health a -agency and <b>pai</b> force planning force recruitment isational objection force recruitment isational objection puarding working onal assistants nunity capacity. urate forecasting anning	described in thes arising from ge to property age or National ces ind direct payme vices economic cond h rvention and re and social care <b>rtnership worl</b> learning and c t and retention ives	the statement of purpose death, injury, or other and other financial risks al Living Wage ents ditions and social eduction strategies e services king competency requirements		
<ul><li>workforce int</li><li>local authorit</li></ul>	telligence ty market positio		ity health and <b>well-being</b> .		

- 1.3. The value of using assets and resources outside traditional services and in the community:
  - develop community capacity
  - user-led, support, self-help and community groups
  - social capital
  - whole system care
  - new and emerging structures in health and public health
  - health and well-being boards
  - Healthwatch as a consumer champion.
- 1.4. The place of technology as a resource in service delivery and service management:
  - integrated assisted living services to promote independent living and support
  - integrated assisted living technologies in home environments and communities
  - challenge of assistive technologies
  - Telehealth and Telecare
  - core digital skills in care
  - business efficiency.
- 1.5. The meaning of sustainability in terms of resource management in adult care:
  - sustainability contingency planning
  - reduced waste, duplication and fragmentation
  - commissioning
  - efficiencies
  - new types and diversification of services
  - public trust and confidence
  - needs driven and outcome-focused services
  - integrated health and social care services.
- 1.6. Roles, responsibilities and accountabilities for resource management within the organisation:
  - legislative and regulatory requirements
  - governance
  - policies, procedures and systems
  - duty of candour.

#### Learning Outcome 2: Understand principles of human resource management

#### Content requirements for Learning Outcome 2:

Knowledge that learners must develop in this unit.

- 2.1. Factors and approaches known to improve recruitment and retention of adult care staff:
  - promoting career opportunities in social care
  - values-based recruitment
  - analysis of exit interviews to review the process and generate actions
  - benefit of well-designed, fair and equitable employment terms and conditions
  - flexible working systems and opportunities
  - workforce learning and development
  - recruitment and retention strategy
  - research reports on recruitment and retention.
- 2.2. Recruitment, selection and induction processes in the organisation and own role within them:
  - legislative and regulatory requirements
  - policies, procedures and systems
  - governance
  - roles and responsibilities
  - the Care Certificate.
- 2.3. The importance of ensuring employment practices are free from discrimination and harassment:
  - legislative requirements
  - policies and procedures
  - benefits of having a multicultural and diverse workforce to service delivery
  - impact on staff morale, employee relations and retention
  - employment tribunals.
- 2.4. How to identify the numbers and patterns of staffing required to provide a personcentred outcomes-based service:
  - needs-led service
  - assessment tools used to assess care and support needs and requirements
  - risk management
  - suitably qualified, competent and experienced staff to meet regulatory requirements
  - organisational and workforce development strategies and plans
  - workforce shaping and commissioning for better outcomes.

2.5. How to manage staffing patterns and adjust them to meet changing circumstances:

- policies, procedures and systems for managing staffing patterns and allocations
- use of information technology in managing staffing patterns and allocations
- risk management.

# Unit glossary of terms

**Partnership working**: Working effectively together with professionals, agencies and organisations to enhance well-being and support positive and improved outcomes.

#### Values-based:

Based on person-centred values which include:

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

**Well-being**: Well-being is a broad concept relating to the following areas in particular: personal dignity, physical and mental health, emotional well-being, protection from abuse and neglect, control over day-to-day life (including control over care and support and the way it is provided), participation in work, education or training, participation in recreation, social and economic well-being, and domestic, family and personal relationships.

# Producing evidence to meet the assessment requirements

#### Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Explain the impact of national and local strategies and priorities on resource planning and management.	
The explanation must include:	
<ul> <li>one (1) example of resource planning and management in own setting</li> <li>an overview of a national strategy or priority</li> <li>how the national strategy or priority is represented at local level</li> <li>the impact on resource planning and management in relation to financial, physical and human resources.</li> </ul>	
1.2. Explain the importance of accurate forecasting for resource requirements.	
1.3. Explain the value of using assets and resources outside traditional services and in the community.	
1.4. Describe the place of technology as a resource in service delivery and service management.	
1.5. Describe the meaning of sustainability in terms of resource management in adult care.	
1.6. Explain roles, responsibilities and accountabilities for resource management within the organisation.	
2.1. Describe factors and approaches known to improve recruitment and retention of adult care staff.	
2.2. Describe own role in relation to recruitment, selection and induction processes in the organisation.	

Assessment requirements	Evidence record eg page number and method
2.3. Discuss the importance of ensuring employment practices are free from discrimination and harassment.	
2.4. Describe how to identify the numbers and patterns of staffing required to provide a person-centred outcomes-based service.	
2.5. Consider how to manage staffing patterns and adjust them to meet changing circumstances in own setting.	
Learners will need the sign-off section declaring own work.	

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Examp	bles of evidence for the learner portfolio
•	annual leave entitlement and booking systems
•	concerns and complaints procedures, transparency and practices
•	contingency plans
•	disciplinary and grievance records
•	efficiency reports
٠	equality and anti-discriminatory policies
٠	exit interviews and feedback
٠	induction
٠	inspection reports and audits
٠	job descriptions
٠	operational and resource plans
٠	performance management
٠	planned coverage of staffing and contingency plans
•	policy and procedural development
•	profile of staff overview and succession planning
•	quality assurance and improvement planning and development
•	quality compliance systems
•	values-based recruitment
٠	risk management
•	service redesign
•	skills audit
•	staffing profile of skills mix
٠	staffing ratios and rotas
٠	strategic plan
٠	succession planning
٠	supervision and appraisal
•	systems and approaches to workforce planning
•	use of agency or temporary staffing
•	use of information technology in scheduling work patterns

- use of information technology in scheduling work patterns
- work products designed for recruitment and induction
- workforce development plans

Learner and Assessor sign-off		
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.	
PIN:		
	Learner signature:	
Centre no:	Date:	
ULN:		
Assessor name:	Assessor sign-off of completed unit: DILMAC 7A	
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.	
	Assessor signature:	
	Date:	
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.		

Theme 2: Governance and quality assurance

DILMAC 2A: Governance of adult care			
Unit reference: R/616/1031	Unit level: 5	Credit: 4	Guided Learning: 35 hours
<b>Unit aim:</b> The aim of this unit is to provide learners with knowledge and			

**Unit aim:** The aim of this unit is to provide learners with knowledge and understanding in relation to the governance of adult care provision.

#### Learning Outcome 1: Understand legislation and statutory requirements that underpin adult care provision.

#### **Content requirements for Learning Outcome 1:**

Knowledge that learners must develop in this unit.

- 1.1. Legislation and statutory frameworks that apply to service providers:
  - legislation and regulatory requirements for the governance of adult social care services, eg Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (part 3) as amended, Care Quality Commission regulations, Care Quality Commission (Registration) Regulations 2009 (part 4), Care Quality Commission fundamental standards
  - NICE (National Institute for Health and Care Excellence) social care guidance and quality standards
  - quality frameworks.
- 1.2. The effect of legislation and policy on person-centred and outcomes-based procedures and practice:
  - adult social care outcomes framework
  - principle of well-being
  - equality, diversity and rights
  - safeguarding
  - mental capacity and Deprivation of Liberty Safeguards (DoLS)
  - whole system approach
  - prevention and early intervention
  - rehabilitation and reablement
  - co-production
  - local and national.

- 1.3. How to use local and national forums to raise potential conflicts between statutory frameworks and values for good practice:
  - Local Enterprise Partnerships (LEPs)
  - Health Education England (HEE)
  - Skills for Care
  - Skills for Health
  - Nursing and Midwifery Council
  - NICE
  - Association of Directors of Adult Social Services (ADASS)
  - Clinical Commissioning Groups (CCGs)
  - adult safeguarding boards
  - commissioners
  - national consultations and enquiries.

#### Learning Outcome 2: Understand modes of service delivery within adult care

#### Content requirements for Learning Outcome 2:

Knowledge that learners must develop in this unit.

- 2.1. The purpose and functions of different modes of service delivery:
  - modes: domiciliary, residential, supported accommodation / extra care, Telecare / remote, community services
  - national, regional and local
  - statutory, private, voluntary, independent
  - allied services (eg housing, community justice, community health).
- 2.2. Management and governance across modes of service delivery:
  - registration and regulation requirements
  - inspection and quality regimes
  - operational specific evidence-based practice
  - outcome-based practice and frameworks
  - roles of boards of governors and trustees
  - funding and commissioning mechanisms (eg commissioned services, direct payments, thresholds, fundraising regulations).
- 2.3. Innovation and alignment across modes of service delivery:
  - evolving adult care sector (policy drivers: eg personalisation, wellbeing, co-production, integration, outcomes focused, prevention, early intervention and reduction, reablement and rehabilitation, community capacity)
  - positive outcomes for individuals
  - whole systems approach
  - new ways of working.

# Learning Outcome 3: Understand internal governance arrangements within own organisation

#### Content requirements for Learning Outcome 3:

Knowledge that learners must develop in this unit.

3.1. Own organisation's governance mechanisms and how these relate to the organisation's identity as a statutory, private, voluntary or independent organisation:

- policies and procedures
- assurance and auditing systems
- impact on the provider market
- values and culture.
- 3.2. Own position of accountability within the governance structure:
  - organisational structure
  - commissioners
  - provider information return (PIR) analysis
  - quality indicators, monitoring and outcomes
  - continuous improvement
  - auditing
  - partner organisations.

3.3. How **agreed ways of working** such as protocols, policies and procedures relate to governance and accountability:

- legal and regulatory requirements
- systems and processes
- reporting
- roles and responsibilities
- limits and boundaries
- assess, monitor and mitigate any risks relating to the health, safety and welfare of individuals and **others**
- root cause analysis (RCA).

# Unit glossary of terms

Agreed ways of working: Will include policies and procedures where these apply.

**Co-production**: Regarding people who use social care, their families and carers as equal partners in decision-making, recognising that people who use support services and their families have expertise that can be used to help make services better not only for themselves but for others too.

Individual: The person using the care or support service.

Others may include:

- individuals
- carers, family members and friends
- advocates
- paid workers
- other professionals.

**Outcome**: An aim or objective that an individual would like to achieve or which needs to happen – for example, continuing to live at home, or being able to go out and about.

**Well-being**: Well-being is a broad concept relating to the following areas in particular: personal dignity, physical and mental health, emotional well-being, protection from abuse and neglect, control over day-to-day life (including control over care and support and the way it is provided), participation in work, education or training, participation in recreation, social and economic well-being, and domestic, family and personal relationships.

## Producing evidence to meet the assessment requirements

## Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Summarise legislation and statutory frameworks that apply to service providers.	
1.2. Analyse the impact of legislation and policy on person- centred and outcomes-based procedures and practice.	
1.3. Explain how to use local and national forums to raise potential conflicts between statutory frameworks and values for good practice.	
2.1. Explain the purpose and functions of different modes of service delivery.	
2.2. Explain management and governance across modes of service delivery.	
2.3. Explore innovation and alignment across modes of service delivery.	
3.1. Evaluate own organisation's governance mechanisms and how these relate to the organisation's identity as a statutory, private, voluntary or independent organisation.	
3.2. Describe own position of accountability within the governance structure.	
3.3. Explain how <b>agreed ways of working</b> such as protocols, policies and procedures relate to governance and accountability in own organisation.	
Learners will need the sign-off section declaring own work.	

#### Examples of evidence for the learner portfolio

- advocacy support
- best interest decision records
- board of governor visit reports
- care planning cycle
- complaints records
- feedback from individuals and others
- improvement action plan for Care Quality Commission or commissioning provider
- inspection and audit reports
- management meetings
- manager quality assurance report
- meetings with individuals
- mental capacity assessments
- networking activity
- notifiable event transcript
- partnership activity
- partnership agreements
- performance management
- provider information return (PIR)
- risk management
- self-assessment reports or self-improvement report
- statement of purpose
- supervision and appraisal
- team meetings
- evidence of debrief / case review / reflective review of near miss events.

Learner and Assessor sign-off		
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.	
PIN:		
	Learner signature:	
Centre no:	Date:	
ULN:		
Assessor name:	Assessor sign-off of completed unit: DILMAC 2A	
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.	
	Assessor signature:	
	Date:	
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.		

DILMAC 2B: Regulatory processes for adult care			
Unit reference: M/616/1036	Unit level: 5	Credit: 5	Guided Learning: 40 hours

**Unit aim:** The aim of this unit is to provide learners with knowledge and understanding of regulatory processes within adult care.

# Learning Outcome 1: Understand systems and requirements for the regulation of adult care services.

#### Content requirements for Learning Outcome 1:

Knowledge that learners must develop in this unit.

- 1.1. Reasons for the inspection system in England, key drivers and legislation underpinning it:
  - relevant legislation, eg Data Protection Act, Health and Care Professions Council (HCPC), Health and Safety Executive (HSE), Health and Safety at Work Act and associated regulations, Equality and Human Rights Commission, Human Rights Act, Equality Act
  - recommendations following inquiries
  - benchmark to the fundamental standards
  - enforcement action.
- 1.2. Which services are subject to registration and inspection:
  - CQC Annex D: Service types
  - accountability to comply with organisational registration
  - framework and extent of the quality assurance
  - RAG rating rationale and strategy.
- 1.3. Key areas of enquiry for inspection:
  - safe ways of working
  - effective care treatment and support
  - caring
  - responsive
  - well-led
  - key lines of enquiry
  - ratings characteristics
  - analysis of audits, actions planned and carried out.

1.4. The grading system and implications of each grade:

- enforcement policy guidance
- representations about a notice served by the Care Quality Commission
- measures taken by the organisation following inspection
- notification to service users
- notification to stakeholders
- consequences of internal and external effects on service
- staff motivation and retention.
- 1.5. Sources of information and support in relation to the regulation of adult care services:
  - where to access
  - regulation information and sources of advice and guidance
  - guidance for providers on meeting the regulations (eg 'Annex C: Glossary of terms' used in the guidance, service specific guidance, provider handbook, service specific appendices).

# Learning Outcome 2: Understand key roles, remits and responsibilities in registered services.

#### Content requirements for Learning Outcome 2:

Knowledge that learners must develop in this unit

#### 2.1. The Registered Manager:

- legal responsibility and accountability for compliance along with the registered provider
- ensure legislative, regulatory, registration and organisational requirements are adhered to
- manage systems, procedures and practice
- manage, measure, monitor, review and evaluate the quality of service provision
- skills, qualifications, competence and experience to fulfil the role.
- 2.2. The nominated individual (and who may be appointed to this role):
  - main point of contact with the regulator
  - must be employed as a director, manager or secretary of the registered service
  - meet regulatory requirements.
- 2.3. The 'fit and proper person':
  - Regulation 5, 6 and 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

#### 2.4. Inspectors:

- monitor, inspect and regulate services
- five key questions and key lines of enquiries
- types of inspections
- gather evidence and provide feedback
- standards of quality and safety
- ratings.

Learning Outcome 3: Understand the inspection process.				
Content requirements for Learning Outcome 3:				
Knowledge that learners must develop in this unit				
3.1. Who needs to be aware of and/or involved in the inspection process:				
<ul> <li>individuals</li> <li>families or carers of individuals</li> <li>others</li> <li>registered manager</li> <li>stakeholders.</li> </ul>				
3.2. How to prepare for an inspection:				
<ul> <li>understand, follow and comply with the regulations</li> <li>evidence of assessing, monitoring, reviewing and evaluating quality</li> <li>clear audit trail of decisions and outcomes.</li> </ul>				
3.3. What is involved during an inspection and the information required:				
<ul> <li>types of inspections</li> <li>key lines of enquiries</li> <li>evidence and information from individuals and others</li> <li>observations</li> <li>review of records, relevant documents, policies and procedures</li> <li>feedback, issues and actions as appropriate</li> <li>reflection and improvements after the inspection.</li> </ul>				
3.4. Ways to address the outcome and impact of an inspection:				
<ul><li>respond to outcomes</li><li>action plan for improvements as appropriate</li></ul>				

• share outcomes with individuals and others.

# Learning Outcome 4: Understand the wider range of regulatory requirements that apply to the service.

#### Content requirements for Learning Outcome 4:

Knowledge that learners must develop in this unit

4.1. Wider regulation processes that apply to the service or aspects of it:

- Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
- Care Quality Commission (Registration) Regulations 2009 (part 4)
- standards in relation to specific aspects of a service (eg accreditation)
- organisational audits.
- 4.2. Types of information required for each regulation process:
  - provider information return (PIR) requires the following information to be collated and shared:
    - staffing and appraisal details
    - compliments and complaints
    - meeting the 5 key questions
    - plans for improving the standards
    - details of who is using the service and in what capacity
    - medication errors
    - deaths in the service
    - mental capacity and Deprivation of Liberty Safeguards (DoLS)
    - health how many service users are at risk of malnutrition and dehydration
    - any awards received, recognition and good practice
    - data collection
    - visits by board of trustees or independent inspection
    - contact details of partnerships
    - feedback from family members and stakeholders
    - access to staff personnel files, supervision, induction, training details
    - action plans from previous inspections.
- 4.3. Areas where different regulatory frameworks may present conflicting requirements and ways to address such conflicts:
  - legislation (eg confidentiality, human rights, health and safety)
  - code of practice defining roles and responsibilities for social care professionals
  - provision of services (eg providing care and support in individuals' home compared to that of a residential or nursing home)
  - duty of care
  - task-based practice as opposed to person-centred, outcome-based practice.

## Unit glossary of terms

**Carer**: A person who provides unpaid support to a partner, family member, friend or neighbour who could not manage without this help.

**Data**: Includes research, reports, statistics, internal and external feedback, suggestions, complaints.

Individual: The person using the care or support service.

Others may include:

- individuals
- carers, family members and friends
- advocates
- paid workers
- other professionals.

Supervision: Supervision includes, but is not limited to, annual appraisal processes.

### Producing evidence to meet the assessment requirements

#### Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Discuss legislation and key drivers which underpin the inspection system.	
1.2. Summarise service provision that is subject to registration and inspection.	
1.3. Describe key areas of enquiry for inspection.	
1.4. Explain the grading system and implications of each grade.	
1.5. Summarise sources of information and support in relation to the regulation of adult care services.	
2.1. Describe the role and responsibilities of the registered manager in relation to compliance with regulations.	
2.2. Explain the role and responsibilities of the nominated individual.	
2.3. Explain what is meant by the 'fit and proper person'.	
2.4. Analyse the role and responsibilities of inspectors.	
3.1. Discuss who needs to be aware of the inspection process and who needs to be involved in the inspection process.	
3.2. Explain how to prepare for an inspection.	
3.3. Summarise each step and the information required within the inspection process.	

Assessment requirements	Evidence record eg page number and method
3.4. Describe collaborative strategies to address the outcome and impact of an inspection.	
4.1. Summarise wider regulation processes that apply to the service or aspects of it	
4.2 Summarise types of information required for regulation processes	
4.3. Describe two (2) examples where regulatory frameworks present conflicting requirements.	
Analyse strategies to address such conflicts.	
Learners will need the sign-off section declaring own work.	

#### Examples of evidence for the learner portfolio

- board of governors visit reports
- disseminating results of inspection and displaying resulting rating
- feedback from individuals and others
- improvement action plan for Care Quality Commission or commissioning provider
- inspection and audit reports
- job descriptions and person specifications
- lobbying forums and activity
- manager quality assurance report
- networking activity
- partnership activity
- policy and procedural development
- provider information return (PIR)
- quality assurance feedback and analysis
- quality improvement plan
- self-assessment report
- team meetings.

Learner and Assessor sign-off				
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.			
PIN:				
	Learner signature:			
Centre no:	Date:			
ULN:				
Assessor name:	Assessor sign-off of completed unit: DILMAC 1B			
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.			
	Assessor signature:			
	Date:			
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.				

## Theme 3: Working with others

DILMAC 3A Communication and information management in adult care						
Unit reference: T/616/1037	Unit level: 5	Credit: 4	Guided Learning: 35 hours			
Unit aim: The aim of this unit is to provide learners with the knowledge,						

understanding and skills required to lead and manage communication systems and practices in adult care.

Learning Outcome 1: Understand models of communication				
Content requirements for Learning Outcome 1:				
Knowledge that learners must develop in this unit.				
1.1. Theoretical models of communication:				
<ul> <li>theoretical models of communication, eg Barnlund Transactional model (1970), Argyle's stages of the communication cycle (1972), Tuckman's stages of group interaction (1965), Shannon and Weaver (1949).</li> </ul>				
1.2. The purpose of different models and systems of communication used in adult care settings:				
<ul> <li>models and systems of communication</li> <li>cycle of communication</li> <li>partnership working</li> <li>active participation</li> <li>person-centred</li> <li>continuity of care</li> <li>needs and preferences</li> <li>technology</li> <li>assistive technology</li> <li>information management</li> <li>different contexts</li> <li>outcomes of evaluation and review.</li> </ul>				
1.3. How communication underpins:				
<ul> <li>sustainable relationships         <ul> <li>active participation and co-production</li> <li>equality, diversity and inclusion</li> </ul> </li> </ul>				
<ul> <li>positive outcomes for individuals and others:</li> <li>duty of candour</li> <li>promote individuals' rights</li> <li>safeguarding</li> </ul>				
<ul> <li>leadership and management of teams:</li> <li>positive culture</li> <li>shared vision</li> </ul>				

- delegation
- teamworking
- conflict resolution:
  - professional boundaries
  - negotiation skills
- multi agency/partnership working:
  - philosophies, principles, priorities and codes of practice
  - continuity of care
- information sharing:
  - confidentiality
  - recording and reporting
  - internal and external communication
  - legal and ethical tensions.

## Learning Outcome 2: Develop communication systems and practices that support positive outcomes

#### Content requirements for Learning Outcome 2:

Skills that learners must develop in this unit.

- 2.1. Monitor and evaluate the effectiveness of the communication systems and practices used in own workplace.
- 2.2. Propose improvements to communication systems and practices and lead the implementation of these improvements.

#### Learning Outcome 3: Implement systems for effective information management

#### Content requirements for Learning Outcome 3:

Skills that learners must develop in this unit.

- 3.1. Lead the implementation of systems for effective information management to meet legal and ethical requirements.
- 3.2. Lead practice to address legal and/or ethical conflicts that arise between maintaining confidentiality and sharing information.

#### Unit glossary of terms

Active participation: A way of working that recognises an individual's right to participate in the activities and relationships of everyday life as independently as possible; the individual is regarded as an active partner in their own care or support, rather than a passive recipient.

**Co-production**: Regarding people who use social care, their families and carers as equal partners in decision-making, recognising that people who use support services and their families have expertise that can be used to help make services better not only for themselves but for others too.

Individual: The person using the care or support service.

Others may include:

- individuals
- carers, family members and friends
- advocates
- paid workers
- other professionals.

**Outcome**: An aim or objective that an individual would like to achieve or which needs to happen – for example, continuing to live at home, or being able to go out and about.

**Partnership working**: Working effectively together with professionals, agencies and organisations to enhance well-being and support positive and improved outcomes.

#### Producing evidence to meet the assessment requirements

#### Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Discuss two theoretical models of communication.	
Evidence <b>must</b> include:	
<ul> <li>research of two theoretical models of communication.</li> </ul>	
1.2. Explain the purpose of different models and systems of communication used in adult care settings.	
The explanation must include:	
<ul> <li>the purpose of different models of communication used in the work setting</li> <li>why different systems of communication are required in adult care services.</li> </ul>	
1.3. Analyse how communication underpins:	
<ul> <li>sustainable relationships</li> <li>positive outcomes for individuals and others</li> <li>leadership and management of teams</li> <li>conflict resolution</li> <li>multi-agency/partnership working</li> <li>information sharing.</li> </ul>	
2.1. Monitor and evaluate the effectiveness of the communication systems and practices used in own workplace.	
2.2. Propose improvements to communication systems and practices and lead the implementation of these improvements.	

Assessment requirements	Evidence record eg page number and method
3.1. Lead the implementation of systems for effective information management to meet legal and ethical requirements.	
3.2. Lead practice to address legal and/or ethical conflicts that arise between maintaining confidentiality and sharing information.	

Learners will need the sign-off section declaring own work.

#### Examples of evidence for the learner portfolio adaptations of information and communication for different contexts and • audiences care planning cycle development of systems of communication information governance • inspection reports and audits • internal/external audits • leadership and management styles models of communication used in setting • networking activity • partnership activity • partnership protocols peer evaluation • policy and procedural development • quality improvement plans report on information exchange, local protocols and ethical considerations review and development of communication systems as a result of legal, lessons learned and ethical requirements risk assessments including use of technology

- role modelling
- safeguarding protocols •
- self-assessment
- service level agreements •
- supervision and appraisal
- team meetings
- workforce development.

Learner and Assessor sign-off				
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.			
PIN:				
	Learner signature:			
Centre no:	Date:			
ULN:				
Assessor name:	Assessor sign-off of completed unit: DILMAC 3A			
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.			
	Assessor signature:			
	Date:			
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.				

DILMAC 4A: Partnership working in adult care						
Unit reference: F/616/1039Unit level: 5Credit: 4Guided Learning: 35 hours						
<b>Unit aim:</b> The aim of this unit is to provide learners with the knowledge, understanding and skills required to lead and manage working relationships						

and partnerships in adult care.

## Learning Outcome 1: Understand the context of relationships and partnership working.

#### Content requirements for Learning Outcome 1:

Knowledge that learners must develop in this unit.

1.1. How legislation and regulation influence working relationships with others:

- Care Act 2014
- Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
- Mental Capacity Act 2005
- Data Protection Act 1998
- Equality Act 2010
- Freedom of Information Act 2000
- Public Interest Disclosure Act 1998
- Human Rights Act 1998
- Caldicott principles
- service, local authority and partner agencies' statutory responsibilities.
- 1.2. How relationships with **individuals** and **carers** underpin **person-centred practice** and affect the achievement of positive **outcomes** for individuals and their families:
  - principles of person-centred care
  - co-production
  - communication
  - partnership working
  - values and behaviours
  - equality, diversity and inclusion
  - risk management.
- 1.3. How networking with other agencies and community groups benefits individuals and the sustainability of the organisation:
  - inter-professional and inter-agency
  - strengthening and building relationships
  - customer and stakeholder focus
  - marketing and promotion opportunities
  - formal and informal support
  - knowledge sharing and expertise
  - development.

- 1.4. How **systems leadership** and **integrated working** with other agencies deliver better outcomes for individuals:
  - statutory responsibilities and accountabilities of partner organisations
  - service design, quality improvement and capacity planning
  - coordinated services
  - efficiency, flexibility and breadth of services available
  - collaboration
  - personalisation
  - co-production
  - systems and collective leadership skills
  - evidence-based practice
  - innovation
  - continuous improvement.
- 1.5. The features of effective partnership working across agencies and ways to overcome barriers:
  - priorities, values and cultures
  - shared agendas, objectives and values
  - common purpose
  - personalisation
  - best interest agenda
  - role of partnership forums and networks
  - roles and responsibilities
  - utilise expertise
  - problem-solving
  - communication
  - data protection and information sharing.
- 1.6. Own role and responsibilities in establishing positive relationships within and beyond the organisation:
  - strategic network and partnership participation
  - other modes of service delivery (eg domiciliary, residential, supported accommodation/extra care, Telecare/remote, and community services)
  - collaborative working relationships
  - leadership and management styles
  - communication and interpersonal skills
  - identifying and challenging discrimination
  - conflict resolution.

## Learning Outcome 2: Lead effective relationships with individuals, carers and families

#### Content requirements for Learning Outcome 2:

Skills that learners must develop in this unit.

- 2.1. Model open, respectful and supportive relationships with individuals and others.
- 2.2. Support others to recognise the value of co-production and the contribution and expertise of individuals, carers and families.
- 2.3. Ensure individuals and carers are aware of their statutory rights.
- 2.4. Implement systems that engage individuals and those important to them in decision-making and review.

## Learning Outcome 3: Manage working relationships with colleagues in the organisation to achieve positive outcomes for individuals

#### Content requirements for Learning Outcome 3:

Skills that learners must develop in this unit.

- 3.1. Develop procedures to facilitate effective working relationships with colleagues.
- 3.2. Develop and agree common objectives when working with colleagues.
- 3.3. Implement systems and practices that allow colleagues to make appropriate contributions using their expertise.
- 3.4. Deal constructively with conflicts or dilemmas that arise.
- 3.5. Evaluate own working relationships with colleagues.

Learning Outcome 4: Work in partnership with professionals in other agencies

#### Content requirements for Learning Outcome 4:

Skills that learners must develop in this unit.

4.1. Negotiate with professionals in other agencies to agree objectives, roles and responsibilities, procedures and ways of working for a specific task or area of work.

4.2. Use agreed ways of working to carry out own role and support **others** to carry out their responsibilities.

4.3. Manage challenges constructively.

4.4. Implement communication and recording systems that comply with current legislation for information sharing between agencies.

4.5. Challenge poor practice in ways that promote change.

4.6. Evaluate and seek agreement for improvements in the effectiveness of partnership work and the underpinning processes.

#### Unit glossary of terms

**Carer**: A person who provides unpaid support to a partner, family member, friend or neighbour who could not manage without this help.

**Co-production**: Regarding people who use social care, their families and carers as equal partners in decision-making. Recognising that people who use support services and their families have expertise that can be used to help make services better not only for themselves but for others too.

Individual: The person using the care or support service.

**Integrated working**: Coordinated health and social care that is planned and organised around the needs and preferences of the individual, their carers and family. Integration may extend to other services, eg housing, that can offer holistic approaches to address individual circumstances.

Others may include:

- individuals
- carers, family members and friends
- advocates
- paid workers.

**Outcome**: An aim or objective that an individual would like to achieve or which needs to happen – for example, continuing to live at home, or being able to go out and about.

**Partnership working**: Working effectively together with professionals, agencies and organisations to enhance well-being and support positive and improved outcomes.

**Person-centred practice**: An approach that puts the person receiving care and support at the centre, treating the individual as an equal partner and ensuring the service fits the person rather than making the person fit the service.

Supervision: Supervision includes - but is not limited to:

- annual appraisal processes
- other professionals.

**Systems leadership**: Systems leadership seeks to affect change for good across interconnecting systems eg health and social care, through leadership and collaboration that extends the usual limits of resources and responsibility

#### Producing evidence to meet the assessment requirements

#### Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Explain how legislation and regulation influence working relationships with <b>others</b> .	
1.2. Discuss how relationships with <b>individuals</b> and <b>carers</b> underpin <b>person-centred practice</b> and affect the achievement of positive <b>outcomes</b> for individuals and their families.	
1.3. Evaluate how networking with other agencies and community groups benefits:	
<ul><li>individuals</li><li>the sustainability of the organisation.</li></ul>	
1.4. Analyse how <b>systems leadership</b> and <b>integrated working</b> with other agencies deliver better outcomes for individuals.	
1.5. Describe:	
<ul> <li>effective partnership working across agencies</li> <li>barriers to effective partnership working across agencies and how they can be overcome.</li> </ul>	
1.6 Describe own role and responsibilities in establishing positive relationships within and beyond the organisation.	
2.1. Model open, respectful and supportive relationships with individuals and others.	
2.2. Support others to recognise the value of <b>co-production</b> and the contribution and expertise of individuals, carers and families.	

Assessment requirements	Evidence record eg page number and method
2.3. Ensure individuals and carers are aware of their statutory rights.	
2.4. Implement systems that engage individuals and those important to them in decision-making and review.	
3.1. Develop procedures to facilitate effective working relationships with colleagues.	
3.2. Develop and agree common objectives when working with colleagues.	
3.3. Implement systems and practices that allow colleagues to make appropriate contributions using their expertise.	
3.4. Deal constructively with conflicts or dilemmas that arise.	
3.5. Evaluate own working relationships with colleagues.	
4.1. Negotiate with professionals in other agencies to agree objectives, roles and responsibilities, procedures, and ways of working for a specific task or area of work.	
4.2. Use agreed ways of working to carry out own role and support <b>others</b> to carry out their responsibilities.	
4.3. Manage challenges constructively.	
4.4. Implement communication and recording systems that comply with current legislation for information sharing between agencies.	
4.5. Challenge poor practice in ways that promote change.	
4.6. Evaluate and seek agreement for improvements in the effectiveness of partnership work and the underpinning processes.	
Learners will need the sign-off section declaring own work.	

#### Examples of evidence for the learner portfolio

- care plan monitoring and audit
- care planning cycle
- coaching and mentoring activity
- feedback and evaluation
- focus group meetings
- inspection reports and audits
- integrated or care coordination meetings
- internal/external audits and reports
- local strategies eg well-being, linking to service and practice
- objective setting processes
- networking activity
- partnership activity
- performance management
- performance plans and indicators
- policy and procedural development
- protocols for working with others
- quality improvement plan
- referrals and representation activity
- resources and signposting
- review and development of communication systems as a result of legal and ethical requirements and lessons learned
- risk assessments
- role modelling
- securing resources and related outcomes
- self and peer evaluation
- service integration
- service level agreements and contracts
- shared commissioning activity
- strategies used to manage conflicts or dilemmas in own setting
- supervision and appraisal
- team building activity
- team meetings
- workforce development.

Learner and Assessor sign-off			
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.		
PIN:			
	Learner signature:		
Centre no:	Date:		
ULN:			
Assessor name:	Assessor sign-off of completed unit: DILMAC 1B		
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.		
	Assessor signature:		
	Date:		
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.			

# Theme 4: Person-centred practice for positive outcomes

DILMAC 5A: Outcomes-based person-centred practice in adult care			
Unit reference: F/616/1042	Unit level: 5	Credit: 5	Guided Learning: 40 hours
<b>Unit aim:</b> The aim of this unit is to provide learners with the knowledge,			

understanding and skills required to lead and manage outcomes-based and personcentred practice in adult care.

Learning Outcome 1: Understand outcomes-based and person-centred practice				
Unit content requirements for Learning Outcome 1:				
Knowledge that learners must develop in this unit.				
1.1. The features, principles and values of outcomes-based practice and how outcomes-based practice relates to the <b>well-being</b> of <b>individuals</b> :				
<ul> <li>current legislation and policy relating to outcomes-based practice and well-being</li> <li>approaches to and theories of outcomes-based practice</li> <li>end result-based accountability</li> <li>outcomes management</li> <li>the principle of well-being</li> <li>psychological, physical, social, emotional, cultural, spiritual and intellectual aspects of well-being.</li> </ul>				
1.2. The features, principles and values of <b>person-centred practice</b> :				
<ul> <li>approaches to and theories of person-centred practice</li> <li>systems, procedures and practice to support person-centred practice</li> <li>personalisation</li> <li>choice and control</li> <li>links between identity and self-esteem</li> <li>active participation</li> <li>partnership working.</li> </ul>				
1.3. The relationship between outcomes-based practice and person-centred practice in supporting positive change for individuals:				

- workforce culture and practice
- assessment, planning and review.

1.4. How active participation contributes to well-being and the achievement of positive outcomes: principle of well-being individual rights inclusive approach independence and autonomy aspirations. 1.5. Ways of working to enable individuals to have choice and control over own decisions and outcomes: systems and processes to promote active participation assessment, planning and review establish consent informed choice decision-making empowerment advocacy risk management. 1.6. How integrated service provision achieves positive outcomes for individuals: legislation and policy related to integrated working service design, quality improvement and capacity planning • range of different agencies including those that cross traditional boundaries (eg between health, housing and social care) modes of service delivery, (eg domiciliary, residential, supported accommodation/extra care, Telecare/remote, and community services) efficiency, flexibility and breadth of services available collaboration co-production coordinated services evidence-based practice innovation continuous improvement.

## Learning Outcome 2: Lead practice to facilitate positive outcomes for individuals through person-centred practice.

#### Content requirements for Learning Outcome 2:

Skills that learners must develop in this unit.

- 2.1. Facilitate a culture that considers in day-to-day practice all aspects of individuals' well-being and their history, preferences, wishes, needs and strengths.
- 2.2. Develop and implement a plan to ensure team members have the training and development needed to support individuals in person-centred ways to achieve positive outcomes.
- 2.3. Lead others to work with individuals and to adapt approaches in response to individuals' evolving needs and preferences.
- 2.4. Manage the review of individuals' preferences, wishes, needs, strengths and the approaches used in their care and support.
- 2.5. Manage resources in ways that support individuals to make choices and achieve positive outcomes.
- 2.6. Manage resources in ways that promote good health and healthy choices.
- 2.7. Implement systems and processes for recording the identification, progress towards and achievement of outcomes.
- 2.8. Implement systems and processes for recording the implementation of personcentred practice.

#### Learning Outcome 3: Lead practice to achieve healthcare outcomes

#### **Content requirements for Learning Outcome 3:**

Skills that learners must develop in this unit.

- 3.1. Support **others** to recognise and record individuals' current and emerging health needs.
- 3.2. Support others to understand why early identification of emerging health needs is important.
- 3.3. Support others to maintain healthcare records in line with requirements.
- 3.4. Implement protocols for involving healthcare professionals.
- 3.5. Use **appropriate healthcare methods** to work towards health outcomes with individuals.
- 3.6. Work with healthcare professionals to ensure team members have appropriate training to carry out healthcare procedures where required.
- 3.7. Ensure lines of accountability for continuing healthcare procedures are understood and agreed.

#### Unit glossary of terms

Active participation: A way of working that recognises an individual's right to participate in the activities and relationships of everyday life as independently as possible; the individual is regarded as an active partner in their own care or support, rather than a passive recipient.

#### Appropriate healthcare methods:

May include:

- regular health checks
- agreed therapeutic activities
- administering prescribed medication or medical treatment
- promoting and supporting healthy lifestyle choices.

**Consent**: Informed agreement to an action or decision; the process of establishing consent will vary according to an individual's assessed capacity to consent.

**Co-production**: Regarding people who use social care, their families and carers as equal partners in decision-making and recognising that people who use support services and their families have expertise that can be used to help make services better not only for themselves but for others too.

Individual: The person using the care or support service.

**Integrated working**: Coordinated health and social care that is planned and organised around the needs and preferences of the individual, their carers and family. Integration may extend to other services, eg housing that can offer holistic approaches to address individual circumstances.

Others may include:

- individuals
- carers, family members and friends
- advocates
- paid workers
- other professionals.

### Unit glossary of terms (cont'd)

**Outcome**: An aim or objective that an individual would like to achieve or which needs to happen – for example, continuing to live at home, or being able to go out and about.

**Partnership working**: Working effectively together with professionals, agencies and organisations to enhance well-being and support positive and improved outcomes.

**Person-centred practice**: An approach that puts the person receiving care and support at the centre, treating the individual as an equal partner and ensuring the service fits the person rather than making the person fit the service.

**Well-being**: Well-being is a broad concept relating to the following areas in particular: personal dignity, physical and mental health, emotional well-being, protection from abuse and neglect, control over day-to-day life (including control over care and support and the way it is provided), participation in work, education or training, participation in recreation, social and economic well-being, and domestic, family and personal relationships.

### Producing evidence to meet the assessment requirements

#### Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Describe the features, principles and values of outcomes- based practice and how outcomes-based practice relates to the <b>well-being</b> of <b>individuals</b> .	
1.2. Explain the features, principles and values of <b>person-</b> <b>centred practice</b> .	
1.3. Consider the relationship between outcomes-based practice and person-centred practice in supporting positive change for individuals.	
Examples from own practice must be included.	
1.4. Discuss how <b>active participation</b> contributes to well-being and positive <b>outcomes</b> for individuals.	
1.5 Discuss ways of working in own setting which promote active participation.	
1.6. Describe how integrated service provision achieves positive outcomes for individuals.	
2.1. Facilitate a culture that considers in day-to-day practice all aspects of individuals' well-being and their history, preferences, wishes, needs and strengths.	
2.2. Develop and implement a plan to ensure team members have the training and development needed to support individuals in person-centred ways to achieve positive outcomes.	
2.3. Lead <b>others</b> to work with individuals and to adapt approaches in response to individuals' evolving needs and preferences.	

Assessment requirements	Evidence record eg page number and method
2.4. Manage the review of individuals' preferences, wishes, needs, strengths and the approaches used in their care and support.	
2.5. Manage resources in ways that support individuals to make choices and achieve positive outcomes.	
2.6. Manage resources in ways that promote good health and healthy choices.	
<ol> <li>Implement systems and processes for recording identification, progress towards and achievement of outcomes.</li> </ol>	
2.8. Implement systems and processes for recording the implementation of person-centred practice.	
3.1. Support others to recognise and record individuals' current and emerging health needs.	
3.2. Support others to understand why early identification of emerging health needs is important.	
3.3. Support others to maintain healthcare records in line with requirements.	
3.4. Implement protocols for involving healthcare professionals.	
3.5. Use <b>appropriate healthcare methods</b> to work towards health outcomes with individuals.	
3.6. Work with healthcare professionals to ensure team members have appropriate training to carry out healthcare procedures where required.	
3.7. Ensure lines of accountability for continuing healthcare procedures are understood and agreed.	
Learners will need the sign-off section declaring own work.	

#### Examples of evidence for the learner portfolio

- care planning cycle
- coaching and mentoring activity
- continuous professional development (CPD)
- induction
- inspection reports and audits
- monitoring, recording and reporting healthcare outcomes
- networking activity
- partnership activity
- peer observation
- performance management
- policies and procedural development
- positive risk-taking
- quality improvement plans
- referrals
- risk assessment
- service user forums, meetings or surveys, comments and complaints
- statement of purpose
- supervision and appraisal
- systems and processes to promote active participation, eg advocacy
- training materials and resources
- workforce development plan
- values statement.

Learner and Assessor sign-off			
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.		
PIN:			
	Learner signature:		
Centre no:	Date:		
ULN:			
Assessor name:	Assessor sign-off of completed unit: DILMAC 5A		
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.		
	Assessor signature:		
	Date:		
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.			

DILMAC 5B: Equality, diversity and inclusion in adult care			
Unit reference: Y/616/1046	Unit level: 5	Credit: 2	Guided Learning: 15 hours
Unit aim: The aim of this unit is to provide learners with the knowledge,			

understanding and skills required to champion equality, diversity and inclusion in adult care.

## Learning Outcome 1: Understand legislation and policy in relation to equality, diversity and inclusion.

#### Unit content requirements for Learning Outcome 1:

#### Knowledge that learners must develop in this unit

- 1.1. The legal context underpinning equality, diversity and inclusion:
  - the legislative framework relating to equality, diversity, inclusion in relation to own area of practice, eg Equality Act 2010, Human Rights Act 1998, Care Act 2014, Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
  - policy initiatives
  - policies and practices that promote equality, diversity and inclusion.
- 1.2. The effects of discrimination and inclusion:
  - impact on individuals' well-being
  - impact on service provision
  - inequalities in adult social care
  - types of discrimination
  - valuing diversity.
- 1.3. The impact of legislation and policy initiatives on the promotion of equality, diversity and inclusion in adult care:
  - standards and benchmarks
  - development and evaluation of policies and procedures
  - promotion of rights and responsibilities of individuals
  - employment and employer rights and responsibilities.

## Learning Outcome 2: Champion equality, diversity and inclusion to achieve positive outcomes

#### Content requirements for Learning Outcome 2:

Skills that learners must develop in this unit.

- 2.1. Evaluate and improve policies, systems, processes and practices that promote equality, diversity and inclusion.
- 2.2. Support **others** to challenge discrimination and exclusion in ways that are likely to achieve change and promote positive outcomes.

#### Unit glossary of terms

#### Standards and benchmarks may include:

- codes of practice
- regulations
- minimum/fundamental standards
- National Occupational Standards (NOS).

Individual: The person using the care or support service.

Others may include:

- individuals
- carers, family members and friends
- advocates
- paid workers
- other professionals.

**Well-being**: Well-being is a broad concept relating to the following areas in particular: personal dignity, physical and mental health, emotional well-being, protection from abuse and neglect, control over day-to-day life (including control over care and support and the way it is provided), participation in work, education or training, participation in recreation, social and economic well-being, and domestic, family and personal relationships.

# Producing evidence to meet the assessment requirements

#### Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Describe the legal context underpinning equality, diversity and inclusion.	
1.2. Describe the impact on own setting of discrimination and inclusion.	
1.3.Describe the impact on own setting of legislation and policy initiatives in relation to the promotion of equality, diversity and inclusion,	
2.1. Evaluate and improve policies, systems, processes and practices that promote equality, diversity and inclusion.	
2.2. Support <b>others</b> to challenge discrimination and exclusion in ways that are likely to achieve change and promote positive outcomes.	
Learners will need the sign-off section declaring own work.	

Examples of evidence for the learner portfolio			
<ul> <li>coaching and mentoring activity</li> <li>induction</li> <li>policy and procedural development</li> <li>role modelling</li> <li>supervision and appraisal</li> <li>training materials</li> <li>workforce development plan.</li> </ul>			

Learner and Assessor sign-off				
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.			
PIN:				
	Learner signature:			
Centre no:	Date:			
ULN:				
Assessor name:	Assessor sign-off of completed unit: DILMAC 5B			
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.			
	Assessor signature:			
	Date:			
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.				

DILMAC 5C: Continuous improvement in adult care						
Unit reference: K/616/1049	Unit level: 5	Credit: 3	Guided Learning: 25 hours			
Unit aim. The sim of this unit is to consider the impact and influence of continuous						

**Unit aim:** The aim of this unit is to consider the impact and influence of continuous professional development on outcomes for adult social care.

## Learning Outcome 1: Lead continuous improvement in practice

### Content requirements for Learning Outcome 1:

Skills that learners must develop in this unit.

- 1.1. Monitor and evaluate progress towards the achievement of positive **outcomes** and the implementation **of person-centred practice**.
- 1.2. Listen to the views of **individuals** and **carers** about the care and support the service provides.
- 1.3. Use evidence-based research to identify best practice in outcomes-based and person-centred practice.
- 1.4. Identify and act on lessons learned from incidents that occur.
- 1.5. Review the extent to which systems, processes and practice facilitate positive outcomes.
- 1.6. Plan for and lead the implementation of improvements to systems, processes and practice.

# Unit glossary of terms

**Carer**: A person who provides unpaid support to a partner, family member, friend or neighbour who could not manage without this help.

Individual: The person using the care or support service.

**Outcome**: An aim or objective that an individual would like to achieve or which needs to happen – for example, continuing to live at home, or being able to go out and about.

**Person-centred practice**: An approach that puts the person receiving care and support at the centre, treating the individual as an equal partner and ensuring the service fits the person rather than making the person fit the service.

## Producing evidence to meet the assessment requirements

#### Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Monitor and evaluate progress towards the achievement of positive <b>outcomes</b> and the implementation of <b>person-centred practice</b> .	
1.2. Listen to the views of <b>individuals</b> and <b>carers</b> about the care and support the service provides.	
1.3. Use evidence-based research to identify best practice in outcomes-based and person-centred practice.	
1.4. Identify and act on lessons learned from incidents that occur.	
1.5. Review the extent to which systems, processes and practice facilitate positive outcomes.	
1.6. Plan for and lead the implementation of improvements to systems, processes and practice.	
Learners will need the sign-off section declaring own work.	

Exam	Examples of evidence for the learner portfolio				
•	continuing professional development (CPD) inspection and audit reports peer observation policy and procedural development quality improvement plans skills analysis				
•	supervision and appraisal team meetings				

training materials.

Learner and Assessor sign-off				
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.			
PIN:				
	Learner signature:			
Centre no:	Date:			
ULN:				
Assessor name:	Assessor sign-off of completed unit: DILMAC 5C			
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.			
	Assessor signature:			
	Date:			
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.				

Theme 5: Professional development, supervision and performance management

DILMAC 6A: Professional development in adult care						
Unit reference: A/616/1055Unit level: 5Credit: 3Guided Learning: 25 hours						
<b>Unit aim:</b> The aim of this unit is to provide learners with knowledge and understanding of professional development in adult care.						

# Learning Outcome 1: Understand principles of professional development in adult care

## Content requirements for Learning Outcome 1:

Knowledge that learners must develop in this unit.

- 1.1. The importance of continually improving knowledge and practice:
  - positive outcomes
  - personal and professional standards and behaviours
  - workforce planning
  - change management
  - evidence-based practice.
- 1.2. Mechanisms and resources that support learning and development in adult care:
  - qualifications
  - National Occupational Standards (NOS)
  - Apprenticeships
  - government initiatives
  - budgets and funding for learning and development
  - learning and development methodologies
  - workforce intelligence
  - performance management
  - endorsement schemes
  - quality marks.
- 1.3. Potential barriers and constraints in relation to professional development in adult care settings:
  - internal and external service barriers
  - intrinsic and extrinsic barriers.

## 1.4. Different **sources and systems of support** for professional development:

- mandatory and optional
- internal/external
- formal/informal support
- value-based recruitment and retention strategies
- funding
- supervision
- appraisal
- mentoring
- coaching
- sharing good practice
- appreciative enquiry
- career progression.
- 1.5. Models of reflection and the importance of reflective practice in improving performance:
  - models of learning and reflection (eg Honey and Mumford (1986), Schon (1983), Davys and Beddoe (2010), Jasper (2006), Kolb (1984), Gibbs (1988))
  - principles of critical evaluation
  - principles of evidence-based practice.
- 1.6. The importance of literacy, numeracy and digital skills in adult care:
  - quality and safety
  - learning needs and assessment strategy
  - communication.
- 1.7. Factors to consider when selecting and commissioning activities for keeping knowledge and practice up to date:
  - validity
  - quality Kitemark
  - impact measures
  - currency
  - value-based
  - resource.

# Unit glossary of terms

**Mechanisms and resources that support learning and development**: Includes qualifications, National Occupational Standards (NOS), Apprenticeships, funding streams, endorsement schemes and quality marks.

**Outcome**: An aim or objective that an individual would like to achieve or which needs to happen – for example, continuing to live at home, or being able to go out and about.

## Sources and systems of support:

Support for professional development may include:

- formal support
- informal support
- supervision
- appraisal
- mentoring
- funding for development activities.

These may be:

- within the organisation
- beyond the organisation.

Supervision: Supervision includes, but is not limited to, annual appraisal processes.

## Producing evidence to meet the assessment requirements

# Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Discuss the importance of continually improving:	
<ul><li>own knowledge and practice</li><li>team knowledge and practice.</li></ul>	
1.2. Analyse <b>mechanisms and resources that support</b> learning and development in adult care.	
1.3. Explain potential barriers and constraints in relation to professional development in adult care settings.	
1.4. Discuss different <b>sources and systems of support</b> for professional development.	
1.5. Explore models of reflection and the importance of reflective practice in improving performance.	
<ul> <li>The exploration must include:</li> <li>a summary of three (3) reflective models, eg Honey and Mumford (1986), Davys and Beddoe (2010), Jasper (2006), Schon (1983), Kolb (1984) or Gibbs (1988)</li> <li>principles, benefits and limits of the reflective models in relation to improving practice and performance.</li> </ul>	
1.6. Explain the importance of literacy, numeracy and digital skills in adult care.	
<ol> <li>Analyse factors to consider when selecting and commissioning activities for keeping knowledge and practice up to date.</li> </ol>	
Learners will need the sign-off section declaring own work.	

## Examples of evidence for the learner portfolio

- budgets and resources
- continuing professional development (CPD)
- formal and informal support systems
- inspection and audit reports
- job descriptions and person specifications
- management meetings
- networking activity
- policy and procedural development
- professional development plans
- self-assessment
- service improvement plan
- skills audits
- supervision and appraisal
- team meetings
- training needs analysis
- workforce development plan.

Learner and Assessor sign-off		
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.	
PIN:		
	Learner signature:	
Centre no:	Date:	
ULN:		
Assessor name:	Assessor sign-off of completed unit: DILMAC 6A	
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.	
	Assessor signature:	
	Date:	
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.		

DILMAC 6B: Supervision and performance management in adult care			
Unit reference: R/616/1059	Unit level: 5	Credit: 5	Guided Learning: 40 hours
Unit aim: The aim of this u	nit is to provide	learners with th	ne knowledge,

understanding and skills required to provide professional supervision in adult care.

# Learning Outcome 1: Understand the purpose and practice of professional supervision in adult care settings

#### Unit content requirements for Learning Outcome 1:

Knowledge that learners must develop in this unit.

1.1. The principles, scope and purpose of professional **supervision**:

- governance
- communicating organisational strategy and performance targets
- competent accountable performance
- support
- feedback on practice
- development needs
- quality and safety
- engagement
- decision-making and challenge
- empowerment.
- 1.2. Theories and models of professional supervision:
  - integrated model
  - development models
  - emotional intelligence
  - ethical considerations
  - **standards and benchmarks** code of conduct, regulations, fundamental standards, National Occupational Standards (NOS), induction standards.
- 1.3. How the requirements of legislation, codes of practice and **agreed ways of working** influence professional supervision:
  - Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 18
  - policy and procedures
  - mandatory training and development
  - code of conduct for healthcare support workers and adult social care workers in england
  - Social Care Commitment.

1.4. How findings from research, critical reviews and inquiries can be used within professional supervision: serious case reviews evidence-based practice • workload management regular training and development updates • job satisfaction, commitment and retention. 1.5. How professional supervision can protect: • the supervisor the supervisee • individuals, carers and families. - duty of candour duty of care safe and effective practice - clarity of roles, responsibilities and accountability. 1.6. How professional supervision can be used to inform performance management: monitoring and reviewing work practices competence, knowledge and skills encourage critical thinking and reflective practice 360° feedback process professional development. 1.7. The rationale for using a 'performance management cycle' model: • inclusive ways of working • championing high standards • quality assurance of performance, values and behaviours. 1.8. How performance indicators can be used to measure practice: relationship between organisational objectives and performance indicators • communication of requirements and expected standards • job descriptions and essential competencies skills and knowledge mapping. 1.9. Factors which can result in a power imbalance in professional supervision and how to address them: legitimate, expert, referent, coercive and reward power personal organisational

• collusion.

- 1.10. The use of conflict resolution models to address challenges arising during professional supervision:
  - task-based
  - relationship-based.
- 1.11 How appraisal processes can be used alongside supervision to manage and improve performance:
  - short-term and long-term planning
  - goal setting and monitoring
  - leadership and management of standards
  - championing high standards
  - professional development.

#### Learning Outcome 2: Understand procedures to address performance management and related issues

## Content requirements for Learning Outcome 2:

Knowledge that learners must develop in this unit.

- 2.1. The organisation's procedures for addressing conduct and performance issues and own role within these procedures:
  - capability, disciplinary, grievance, and misconduct procedures
  - performance management cycle
  - formal and informal procedures
  - actions to be taken
  - roles and responsibilities
  - timescales
  - records.
- 2.2. The organisation's discipline and grievance procedures and own role within these procedures:
  - definition of 'discipline case' and 'grievance case'
  - legal obligations and rights of employees
  - misconduct and gross misconduct
  - sources of advice and expertise
  - principles of communication in the management of discipline and grievance cases.

## Learning Outcome 3: Provide professional supervision

## **Content requirements for Learning Outcome 3:**

Knowledge and skills that learners must develop in this unit.

- 3.1. Establish agreement with the supervisee in relation to:
  - confidentiality, boundaries, roles and accountability
  - the frequency and location of supervision sessions
  - sources of **data** and evidence that can be used to inform supervision
  - actions to be taken in preparation for supervision.
- 3.2. Analyse information from a range of perspectives to build an evidence-based understanding of the supervisee's performance.
- 3.3. Support the supervisee to reflect on their practice.
- 3.4. Provide **constructive feedback** to improve performance.
- 3.5. Support the supervisee to identify own development needs.
- 3.6. Review and revise targets to meet objectives of the work setting and individual objectives of the supervisee.
- 3.7. Support supervisee to explore different methods of addressing challenges in their work.
- 3.8. Record agreed supervision decisions.
- 3.9. Adapt own approaches to professional supervision in response to feedback from supervisees and **others**.

# Unit glossary of terms

Agreed ways of working: Will include policies and procedures where these apply.

**Carer**: A person who provides unpaid support to a partner, family member, friend or neighbour who could not manage without this help.

**Constructive feedback**: Feedback that addresses both positive and negative considerations expressed in a way that encourages reflection and change.

**Data**: Includes research, reports, statistics, internal and external feedback, suggestions, complaints.

Individual: The person using the care or support service.

Others may include:

- individuals
- carers, family members and friends
- advocates
- paid workers
- other professionals.

Standards and benchmarks may include:

- codes of practice
- regulations
- minimum/fundamental standards
- National Occupational Standards (NOS).

Supervision: Supervision includes, but is not limited to, annual appraisal processes.

# Producing evidence to meet the assessment requirements

# Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Discuss the principles, scope and purpose of professional <b>supervision</b> .	
1.2. Summarise two (2) theories or models of professional supervision.	
1.3. Explain how the requirements of legislation, codes of practice and <b>agreed ways of working</b> influence professional supervision.	
1.4. Discuss how findings from research, critical reviews and inquiries can be used within professional supervision.	
Evidence must include:	
<ul> <li>a review of two (2) research studies, critical reviews or inquiries</li> <li>how conclusions drawn inform professional supervision.</li> </ul>	
1.5. Explain how professional supervision can protect:	
<ul> <li>the supervisor</li> <li>the supervisee</li> <li>individuals, families and carers.</li> </ul>	
1.6. Describe how professional supervision can be used to inform performance management.	
1.7. Explore the rationale for using a 'performance management cycle' model.	
1.8. Explain how performance indicators can be used to measure practice.	

Assessment requirements	Evidence record eg page number and method
1.9. Discuss factors which can result in a power imbalance in professional supervision and how to address them.	
1.10. Analyse the use of two (2) conflict resolution models to address challenges arising during professional supervision.	
1.11. Explain how appraisal processes can be used alongside supervision to manage and improve performance.	
2.1. Discuss the organisation's procedures for: conduct and performance issues	
Evidence must include a discussion of own role within these procedures.	
2.2. Discuss the organisation's procedures for discipline and grievance.	
Evidence must include a discussion of own role within these procedures	
3.1. Establish agreement with the supervisee in relation to:	
<ul> <li>confidentiality, boundaries, roles and accountability</li> <li>the frequency and location of supervision sessions</li> <li>sources of <b>data</b> and evidence that can be used to inform supervision</li> <li>actions to be taken in preparation for supervision.</li> </ul>	
3.2. Analyse information from a range of perspectives to build an evidence-based understanding of the supervisee's performance.	
3.3. Support supervisee to reflect on their practice.	
3.4. Provide <b>constructive feedback</b> to improve performance.	
3.5. Support supervisee to identify own development needs.	
3.6. Review and revise targets to meet objectives of the work setting and individual objectives of the supervisee.	

Assessment requirements	Evidence record eg page number and method
3.7. Support supervisee to explore different methods of addressing the challenging situations in their work.	
3.8. Record agreed supervision decisions.	
3.9. Adapt own approaches to professional supervision in response to feedback from supervisees and <b>others</b> .	

## Learners will need the sign-off section declaring own work.

## Examples of evidence for the learner portfolio

- 360° approach
- coaching and mentoring activity
- continuous professional development (CPD)
- induction
- inspection and audit reports
- learning and development
- models and tools for performance management
- peer observation
- performance management
- performance outcome measures
- personal development plans
- policy and procedural development
- quality improvement plans
- self-evaluation cycle
- self-assessment reports
- strategic development plan
- supervision and appraisal
- team meeting
- workforce development plan.

Learner and Assessor sign-off		
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.	
PIN:		
	Learner signature:	
Centre no:	Date:	
ULN:		
Assessor name:	Assessor sign-off of completed unit: DILMAC 6B	
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.	
	Assessor signature:	
	Date:	
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.		

Theme 6: Safe ways of working, protection and risk

# DILMAC 8A: Safeguarding and protection in adult care

	Unit evel: 5	<b>Credit:</b> 5	Guided Learning: 40 hours
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**Unit aim:** The aim of this unit is to provide learners with knowledge, understanding and skills in relation to safeguarding and protection in adult care. It includes safeguarding in relation to adults and children and young people who may come into contact with the service.

Learning Outcome 1: Understand requirements for the safeguarding of vulnerable adults				
Content requirements for Learning Outcome 1:				
Knowledge that learners must develop in this unit.				
1.1. The current legislative framework that underpins the safeguarding of vulnerable adults:				
<ul> <li>legislation and policy that underpins safeguarding in adult care</li> <li>local systems for safeguarding individuals</li> <li>the role of safeguarding adults boards (SABs)</li> <li>the role of external agencies</li> <li>Disclosure and Barring Service (DBS)</li> <li>protection of vulnerable adults (POVA)</li> <li>vetting and barring</li> <li>safe recruitment.</li> </ul>				
1.2. How national and local guidelines, policies and procedures for safeguarding affect:				
<ul> <li>day-to-day work with individuals</li> <li>the manager's responsibilities towards individuals, their families, carers and team members.</li> </ul>				
<ul> <li>impact of legislation and policy within the context of the setting</li> <li>organisational policies and procedures</li> <li>safe and effective standards of care</li> <li>duty of candour</li> <li>comments and complaints</li> <li>referral protocols.</li> </ul>				
1.3. Legal provisions in relation to whistle-blowing:				
Public Interest Disclosure Act 1998				

- protective measures for whistle-blowers
- lines of reporting.

Learning Outcome 2: Understand how public inquiries and serious case reviews

## inform practice

## Content requirements for Learning Outcome 2:

Knowledge that learners must develop in this unit.

2.1. How public inquiries and serious case reviews inform practice:

- lessons learned
- recommendations and changes to legislation
- evidence-based practice
- Francis Inquiry
- Cavendish Review
- Winterbourne View.

#### Learning Outcome 3: Lead the implementation of policies and procedures to support safeguarding of vulnerable adults

### Content requirements for Learning Outcome 3:

Skills that learners must develop in this unit.

- 3.1. Ensure that all policies, procedures, systems and processes used in the work setting comply with legal requirements.
- 3.2. Support team members to develop the knowledge and skills they need to safeguard vulnerable adults.
- 3.3. Plan the review and revision of **policies and procedures in relation to safeguarding** vulnerable adults to include:
  - the views of vulnerable adults and those who are important to them
  - current guidance arising from serious case reviews
  - support systems for staff and others
  - liaison with external organisations.
- 3.4. Review and revise policies and procedures to ensure continuous improvement in safeguarding of vulnerable adults.

3.5. Follow agreed protocols to participate in inter-agency, joint or **integrated working** in order to protect vulnerable adults.

## Learning Outcome 4: Understand the use and impact of restrictive practices

## Content requirements for Learning Outcome 4:

Knowledge that learners must develop in this unit.

4.1. Definitions of 'restrictive practices', 'restraint' and 'hidden restraint'.

- 4.2. The impact of restrictive practices on safety, dignity, relationships and well-being:
  - individual physical and psychological, social, emotional
  - relationship between care workers and individuals
  - culture of the setting.
- 4.3. How **person-centred practice** and accurate assessment can minimise the use of restrictive practices:
  - individual behaviour support plans
  - risk assessment
  - approaches used to encourage individuals to gain insight and coping strategies
  - proactive strategies versus reactive strategies.
- 4.4. Organisational requirements and legal implications relating to restrictive practices:
  - clearly-defined roles and responsibilities, boundaries and limits
  - guidelines for least restrictive interventions
  - internal and external recording and reporting procedures
  - analysis of use of restrictive interventions used to inform future practice
  - mandatory training requirements.

# Learning Outcome 5: Understand local systems for safeguarding children and young people

### **Content requirements for Learning Outcome 5:**

Knowledge and skills that learners must develop in this unit.

- 5.1. Local systems for safeguarding children and young people and the manager's responsibilities in relation to these:
  - policies and procedures
  - Local Safeguarding Children Boards (LSCB)
  - Common Assessment Framework (CAF)
  - Team Around the Child (TAC)
  - the role of external agencies and the lead professional.

## Learning Outcome 6: Support safeguarding of children and young people encountered in an adult social care service

## Content requirements for Learning Outcome 6:

Knowledge and skills that learners must develop in this unit.

6.1. Support team members to understand:

- why everyone has a responsibility to act on concerns in relation to the abuse of a child or young person
- the actions to take if a concern, disclosure or allegation arises.

## Unit glossary of terms

**Carer**: A person who provides unpaid support to a partner, family member, friend or neighbour who could not manage without this help.

Individual: The person using the care or support service.

**Integrated working**: Coordinated health and social care that is planned and organised around the needs and preferences of the individual, their carers and family. Integration may extend to other services, for example housing, that can offer holistic approaches to address individual circumstances.

Others may include:

- individuals
- carers, family members and friends
- advocates
- paid workers
- other professionals.

**Person-centred practice**: An approach that puts the person receiving care and support at the centre, treating the individual as an equal partner and ensuring the service fits the person rather than making the person fit the service.

#### Policies and procedures in relation to safeguarding:

May include policies and procedures on:

- listening to vulnerable adults
- sharing concerns and recording/reporting incidents
- dealing with allegations
- duty of care
- whistle-blowing
- propriety and behaviour
- physical contact/intimate personal care
- off-site visits
- photography and video
- timely and accurate information sharing
- partnership working.

**Restrictive practices**: Restrictive practices may include any type of practice or intervention that limits the rights or freedom of movement of a person.

**Well-being**: Well-being is a broad concept relating to the following areas in particular: personal dignity, physical and mental health, emotional well-being, protection from abuse and neglect, control over day-to-day life (including control over care and support and the way it is provided), participation in work, education or training, participation in recreation, social and economic well-being, and domestic, family and personal relationships.

# Producing evidence to meet the assessment requirements

### Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Explain the current legislative framework that underpins the safeguarding of vulnerable adults.	
1.2. Explain how national and local guidelines, policies and procedures for safeguarding affect:	
<ul> <li>day-to-day work with individuals</li> <li>the manager's responsibilities towards individuals, their families, their carers and team members.</li> </ul>	
Identify two (2) national guidelines and two (2) local guidelines in relation to safeguarding vulnerable adults. Explain how they are met through policy and procedure in own setting.	
1.3. Discuss legal provisions in relation to whistle-blowing.	
2.1. Explain how public inquiries and serious case reviews inform practice.	
3.1. Ensure that all policies, procedures, systems and processes used in the work setting comply with legal requirements.	
3.2. Support team members to develop the knowledge and skills they need to safeguard vulnerable adults.	

Assessment requirements	Evidence record eg page number and method
3.3. Plan the review and revision of policies and procedures to ensure continuous improvement in safeguarding of vulnerable adults.	
The review must include:	
<ul> <li>the views of vulnerable adults and those who are important to them</li> <li>current guidance arising from serious case reviews</li> <li>support systems for staff and <b>others</b></li> <li>liaison with external organisations.</li> </ul>	
3.4 Review and revise policies and procedures to ensure continuous improvement in safeguarding of vulnerable adults	
3.5. Follow agreed protocols to participate in inter-agency, joint or <b>integrated working</b> in order to protect vulnerable adults.	
4.1. Define ' <b>restrictive practices</b> ', 'restraint' and 'hidden restraint'.	
Provide definitions for the identified terms. Examples may be used to support the definitions.	
4.2. Analyse the impact of restrictive practices on safety, dignity, relationships and <b>well-being</b> .	
4.3. Discuss how <b>person-centred practice</b> and accurate assessment can minimise the use of restrictive practices.	
4.4. Evaluate organisational requirements and legal implications relating to restrictive practices.	
5.1. Explore local systems for safeguarding children and young people and the manager's responsibilities in relation to these.	
6.1. Support team members to understand:	
<ul> <li>why everyone has a responsibility to act on concerns in relation to the abuse of a child or young person</li> <li>the actions to take if a concern, disclosure or allegation arises.</li> </ul>	

## Examples of evidence for the learner portfolio

- coaching and mentoring activity
- common assessment framework
- induction
- inspection and audit reports
- partnership activity
- performance management
- policy and procedural development
- quality improvement plans
- supervision and appraisal
- training materials
- workforce development plans.

Learner and Assessor sign-off			
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.		
PIN:			
	Learner signature:		
Centre no:	Date:		
ULN:			
Assessor name:	Assessor sign-off of completed unit: DILMAC 8A		
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.		
	Assessor signature:		
	Date:		
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.			

DILMAC 8B: Health and safety in adult care			
Unit reference: M/616/1070	Unit level: 5	Credit: 2	Guided Learning: 15 hours
<b>Unit aim:</b> The aim of this unit is to provide learners with knowledge, understanding			

**Unit aim:** The aim of this unit is to provide learners with knowledge, understanding and skills in relation to health and safety in adult care.

# Learning Outcome 1: Understand the legislative framework for health and safety in adult care settings

### Unit content requirements for Learning Outcome 1:

Knowledge and skills that learners must develop in this unit.

1.1. The legislative framework for health and safety in adult care settings:

- regulations
- policies and procedures
- role of the Health and Safety Executive (HSE)
- security and access to premises
- emergency
- provision, maintenance and safe use of facilities, equipment and resources
- infection prevention and control
- food safety
- moving and positioning
- safe handling of medicines
- disposal of waste and environmental safety
- control of hazardous substances
- accident and incident reporting
- risk management
- role and expectations of regulators.

# Learning Outcome 2: Understand own role, responsibilities and accountability in relation to infection prevention and control in adult care

## Content requirements for Learning Outcome 2:

Knowledge and skills that learners must develop in this unit

2.1. Own role, responsibilities, and accountability in relation to infection prevention and control:

- policies and procedural development
- risk management
- vulnerability to infection
- continuous professional development (CPD).

2.2. How to recognise, manage and respond to outbreaks of infection in the work setting:

- definition of an outbreak
- implementation of policy and procedure and control measures
- reporting and recording
- accessible information and guidance for individuals and others
- support from external bodies
- root cause analysis (RCA).

# Learning Outcome 3: Lead the implementation of procedures for health and safety requirements

### Content requirements for Learning Outcome 3:

Skills that learners must develop in this unit.

- 3.1. Support others to comply with legislative and organisational health and safety policies, procedures and practices relevant to their work.
- 3.2. Ensure others are aware of actions if procedures and practices are not complied with.
- 3.3. Complete records and reports on health and safety issues according to legislative and organisational requirements.
- 3.4. Evaluate and improve health and safety policies, procedures and practices.

## Unit glossary of terms

Individual: The person using the care or support service.

Others may include:

- individuals
- carers, family members and friends
- advocates
- paid workers
- other professionals.

## Producing evidence to meet the assessment requirements

#### Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Summarise the legislative framework for health and safety in adult care settings.	
2.1. Evaluate own role, responsibilities, and accountability in relation to infection prevention and control.	
2.2. Explain how to recognise, manage and respond to outbreaks of infection in the work setting.	
3.1. Support <b>others</b> to comply with legislative and organisational health and safety policies, procedures and practices relevant to their work.	
3.2. Ensure others are aware of actions if procedures and practices are not complied with.	
3.3. Complete records and reports on health and safety issues according to legislative and organisational requirements.	
3.4. Evaluate and improve health and safety policies, procedures and practices.	
Learners will need the sign-off section declaring own work.	

#### Examples of evidence for the learner portfolio

- analysis of data: accidents, incidents, reports, comments and complaints with recommendations and targets for improved outcomes
- health and safety audit internal and/or external
- inspection and audit reports
- performance management
- policy and procedural development
- records and reports: accidents, incidents, medication-related incidents or errors, review and audit.
- strategic planning
- supervision and appraisal
- team meetings
- training records
- workforce development plan

Learner and Assessor sign-off			
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.		
PIN:			
	Learner signature:		
Centre no:	Date:		
ULN:			
Assessor name:	Assessor sign-off of completed unit: DILMAC 8B		
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.		
	Assessor signature:		
	Date:		
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.			

DILMAC 8C: Risk taking and risk management in adult care			
Unit reference: D/616/1078Unit level: 5Credit: 4Guided Learning: 35 hours			
<b>Unit aim:</b> The aim of this unit is to provide learners with the knowledge,			

understanding and skills required to manage risk and support positive risk-taking in adult care.

#### Learning Outcome 1: Understand positive risk-taking

#### **Content requirements for Learning Outcome 1:**

Knowledge that learners must develop in this unit.

- 1.1. How risk-taking can contribute to the achievement of positive **outcomes** for **individuals**:
  - positive risk taking
  - balanced approach between risk and rights
  - informed choice and control
  - development of independence
  - health and well-being.

1.2. The impact of a risk-averse culture on **person-centred practice** and the **wellbeing** of individuals:

- physical, social, emotional and cognitive well-being
- skills development
- culture of organisation (service-led)
- power imbalance.

1.3. How supporting **others** to balance risks and rights informs practice:

- individual approach to risk assessment
- reflective practice
- continuous improvement.

#### Learning Outcome 2: Understand issues around mental capacity and consent

#### Content requirements for Learning Outcome 2:

Knowledge that learners must develop in this unit

- 2.1. Links between consent, risk management and safeguarding:
  - principles of mental capacity, consent and decision-making
  - balance between duty of care and individual rights.
- 2.2. Key provisions of legislation regarding mental capacity and how these relate to the service:
  - current legislation, guidance and codes of practice
  - policy and procedural development.
- 2.3. The support available when mental capacity needs to be assessed:
  - circumstances when an assessment of mental capacity is necessary
  - how mental capacity is assessed
  - the roles of different professionals that may be involved
  - the support available during the assessment of mental capacity.
- 2.4. Systems that support individuals to give informed consent:
  - confirming consent
  - shared and informed decision-making
  - accessible format
  - advocacy
  - boundaries and limitations when supporting individuals to give informed consent.
- 2.5. Ways to address situations where consent cannot be given:
  - the principle of 'best interests'
  - the role of advocates.

# Learning Outcome 3: Lead the implementation of policies, procedures and practices to manage risk

#### **Content requirements for Learning Outcome 3:**

Skills that learners must develop in this unit

- 3.1. Contribute to the development of policies, procedures and practices to identify, assess and manage risk.
- 3.2. Balance the management of risks with an individual's rights and the duty of care of the organisation.
- 3.3. Work with others to assess and manage risks and issues.
- 3.4. Evaluate own practice in leading a balanced approach to risk taking and risk management.

#### Unit glossary of terms

**Consent**: Informed agreement to an action or decision; the process of establishing consent will vary according to an individual's assessed capacity to consent.

Individual: The person using the care or support service.

Others may include:

- individuals
- carers, family members and friends
- advocates
- paid workers
- other professionals.

**Outcome**: An aim or objective that an individual would like to achieve or which needs to happen – for example, continuing to live at home, or being able to go out and about.

**Person-centred practice**: An approach that puts the person receiving care and support at the centre, treating the individual as an equal partner and ensuring the service fits the person rather than making the person fit the service.

**Well-being**: Well-being is a broad concept relating to the following areas in particular: personal dignity, physical and mental health, emotional well-being, protection from abuse and neglect, control over day-to-day life (including control over care and support and the way it is provided), participation in work, education or training, participation in recreation, social and economic well-being, and domestic, family and personal relationships.

## Producing evidence to meet the assessment requirements

#### Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Explain how risk-taking can contribute to the achievement of positive <b>outcomes</b> for <b>individuals</b>	
Examples may be used to support the explanation.	
1.2. Explain the impact of a risk adverse culture <b>on person-</b> <b>centred practice</b> and individuals' well-being	
Examples may be used to support the explanation.	
1.3. Explain how supporting <b>others</b> to balance risks and rights informs practice.	
Examples may be used to support the explanation.	
2.1. Describe links between <b>consent</b> , risk management and safeguarding.	
2.2. Explain key provisions of legislation regarding mental capacity and how these relate to the service.	
2.3. Evaluate the support available when mental capacity needs to be assessed.	
The evaluation must include:	
<ul> <li>circumstances when an assessment of mental capacity is necessary</li> <li>how mental capacity is assessed</li> <li>the roles of different professionals that may be involved</li> <li>the support available during the assessment of mental capacity.</li> </ul>	

Assessment requirements	Evidence record eg page number and method
2.4. Describe systems that support individuals to give informed consent.	
2.5. Analyse ways to address situations where consent cannot be given.	
3.1. Contribute to the development of policies, procedures and practices to identify, assess and manage risk.	
3.2. Balance the management of risks with an <b>individual's</b> rights and the duty of care of the organisation.	
3.3. Work with <b>others</b> to assess and manage risks and issues.	
3.4. Evaluate own practice in leading a balanced approach to risk taking and risk management.	
Learners will need the sign-off section declaring own work.	

#### Examples of evidence for the learner portfolio

- care planning cycle
- case management
- inspection and audit reports
- minutes of meetings
- partnership activity
- policy and procedural development
- service improvement plans
- risk management
- skills gap analysis
- workforce development plan.

Learner and Assessor sign-off			
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.		
PIN:			
	Learner signature:		
Centre no:	Date:		
ULN:			
Assessor name:	Assessor sign-off of completed unit: DILMAC 8C		
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.		
	Assessor signature:		
	Date:		
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.			

DILMAC 8D: Managing concerns and complaints in adult care			
Unit reference: Y/616/1080	Unit level: 5	Credit: 3	Guided Learning: 25 hours

**Unit aim:** The aim of this unit is to provide learners with the knowledge, understanding and skills required to manage concerns and complaints in adult care.

#### Learning Outcome 1: Understand the management of concerns and complaints

#### Content requirements for Learning Outcome 1:

Knowledge that learners must develop in this unit.

- 1.1. Links between the management of concerns, complaints, risk management and safeguarding:
  - transparency within a 'learning' organisation
  - analysis of complaints and concerns
  - areas of concern
  - impact of response to concerns or complaints
  - quality improvement.
- 1.2. Regulatory requirements, codes of practice and guidance for managing concerns and complaints:
  - Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 16
  - policies and procedures
  - duty of candour
  - whistle-blowing
  - lines of reporting.
- 1.3. Why **individuals** and **others** may be reluctant to raise concerns or make complaints:
  - perceived repercussions
  - inaccessible complaints procedures.
- 1.4. Attitudes and approaches that ensure concerns and complaints encourage continuous improvement of the service:
  - establish a culture of openness
  - address areas of concern and complaints
  - review, evaluate and action improvements to practice and the service the authority to implement changes and lines of reporting.

#### Learning Outcome 2: Lead practice to address concerns and complaints

#### Content requirements for Learning Outcome 2:

Skills that learners must develop in this unit.

- 2.1. Support team members to understand systems and procedures relating to concerns and complaints.
- 2.2. Implement systems and procedures that address and respond to concerns and complaints within agreed time frames.
- 2.3. Ensure information and support is available to individuals and **carers** who wish to raise concerns and make complaints.
- 2.4. Use outcomes from concern and complaint investigations to make improvements to the service.

## Unit glossary of terms

**Carer**: A person who provides unpaid support to a partner, family member, friend or neighbour who could not manage without this help.

Individual: The person using the care or support service.

Others may include:

- individuals
- carers, family members and friends
- advocates
- paid workers
- other professionals.

## Producing evidence to meet the assessment requirements

#### Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Discuss links between the management of concerns, complaints, risk management and safeguarding.	
1.2. Evaluate regulatory requirements, codes of practice and guidance for managing concerns and complaints.	
1.3. Consider why those using services may be reluctant to raise concerns or make complaints.	
1.4. Explore attitudes and approaches that ensure concerns and complaints encourage continuous improvement of the service.	
2.1. Support team members to understand systems and procedures relating to concerns and complaints.	
2.2. Implement systems and procedures that address and respond to concerns and complaints within agreed time frames.	
2.3. Ensure information and support is available to <b>individuals</b> and <b>carers</b> who wish to raise concerns and make complaints.	
2.4. Use outcomes from concern and complaint investigations to make improvements to the service.	
Learners will need the sign-off section declaring own work.	

#### Examples of evidence for the learner portfolio

- coaching and mentoring activity
- impact of serious case reviews on practice
- induction
- inspection and audit reports
- performance management
- policy and procedural development
- service improvement plans
- role modelling
- supervision and appraisal
- team meetings
- training materials
- user-friendly systems
- workforce development plan.

Learner and Assessor sign-off		
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.	
PIN:		
	Learner signature:	
Centre no:	Date:	
ULN:		
Assessor name:	Assessor sign-off of completed unit: DILMAC 8D	
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.	
	Assessor signature:	
	Date:	
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.		

Theme 7: Managing and developing self

DILMAC 9A: Manage self in adult care			
Unit reference: K/616/1083	Unit level: 5	Credit: 4	Guided Learning: 35 hours

understanding and skills required to manage own workload and professional behaviour when working in adult care.

Learning Outcome 1: Understand the importance of self-awareness			
Content requirements for Learning Outcome 1:			
Knowledge that learners must develop in this unit			
1.1. How own values, belief systems and experiences affect working practice:			
<ul> <li>frames of reference and their influences - social norms, personal and professional experiences</li> <li>critical analysis of own values, belief systems and experiences</li> <li>transference theory</li> <li>restorative theory</li> <li>three-dimensional supervision.</li> </ul>			
1.2. How own emotions affect own behaviour and the behaviour of <b>others</b> :			
<ul> <li>emotional intelligence</li> <li>emotional energy matrix – high positive energy; high negative energy</li> <li>leader behaviours – task, relations and change orientated</li> <li>personal integrity.</li> </ul>			
1.3. Strategies for recognising own stress levels and for maintaining well-being:			
<ul> <li>time management</li> <li>communication strategies</li> <li>understanding stress indicators and symptoms</li> <li>access support mechanisms and resources.</li> </ul> 1.4. How to use feedback and reflective practice to increase own self-awareness:			
<ul> <li>360° reflection model</li> <li>models of learning and reflection (eg Honey and Mumford (1986), Schon (1983), Davys and Beddoe (2010), Jasper (2006), Kolb (1984), Gibbs (1988))</li> </ul>			
<ul> <li>mechanisms for and analysis of effective feedback</li> <li>action areas for improvement</li> <li>managing own behaviour</li> <li>professional development plan.</li> </ul>			

#### Learning Outcome 2: Manage own behaviour

#### Content requirements for Learning Outcome 2:

Skills that learners must develop in this unit.

- 2.1. Ensure own actions reflect a high standard of personal integrity.
- 2.2. Manage own emotions when interacting with others.
- 2.3. Adapt actions and behaviour in response to feedback.
- 2.4. Adapt communication in response to the emotional context and communication style of others.
- 2.5. Ensure own words and actions reinforce the vision and values of the service.
- 2.6. Challenge views, actions, systems and routines that do not match the vision and values of the service.

#### Learning Outcome 3: Manage own workload

#### **Content requirements for Learning Outcome 3:**

Skills that learners must develop in this unit.

- 3.1. Use strategies and tools to identify priorities for work.
- 3.2. Plan ways to meet responsibilities and organisational priorities while maintaining own well-being.
- 3.3. Use digital technology to enhance own efficiency.
- 3.4. Delegate responsibilities appropriately to others.
- 3.5. Revise plans to take account of changing circumstances.

#### Learning Outcome 4: Undertake own professional development

#### Content requirements for Learning Outcome 4:

Skills that learners must develop in this unit.

4.1. Evaluate own knowledge and performance against:

- standards and benchmarks
- feedback from others.
- 4.2. Prioritise own development goals and targets.
- 4.3. Produce a plan to meet development goals and targets using learning opportunities that meet objectives and reflect own learning style.
- 4.4. Establish a process to evaluate the effectiveness of own professional development plan.
- 4.5. Evaluate how own practice has been improved through:
  - reflection on feedback from others
  - reflection on failures and mistakes, successes and achievements
  - implementation of the professional development plan.

#### Unit glossary of terms

Others may include:

- individuals
- carers, family members and friends
- advocates
- paid workers
- other professionals.

#### Standards and benchmarks may include:

- codes of practice
- regulations
- minimum/fundamental standards
- National Occupational Standards (NOS).

**Well-being**: Well-being is a broad concept relating to the following areas in particular: personal dignity, physical and mental health, emotional well-being, protection from abuse and neglect, control over day-to-day life (including control over care and support and the way it is provided), participation in work, education or training, participation in recreation, social and economic well-being, and domestic, family and personal relationships.

## Producing evidence to meet the assessment requirements

#### Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Consider how own values, belief systems and experiences affect working practice.	
1.2. Discuss how own emotions affect own behaviour and the behaviour of <b>others</b> .	
1.3. Discuss three (3) strategies that could be used to help manage own stress levels and maintain <b>well-being.</b>	
1.4. Explain how feedback and reflective practice can be used to increase own self-awareness.	
2.1. Ensure own actions reflect a high standard of personal integrity.	
2.2. Manage own emotions when interacting with others.	
2.3. Adapt actions and behaviour in response to feedback.	
2.4. Adapt communication in response to the emotional context and communication style of others.	
2.5. Ensure own words and actions reinforce the vision and values of the service.	
2.6. Challenge views, actions, systems and routines that do not match the vision and values of the service.	
3.1. Use strategies and tools to identify priorities for work.	
3.2. Plan ways to meet responsibilities and organisation priorities while maintaining own well-being.	

Assessment requirements	Evidence record eg page number and method
3.3. Use digital technology to enhance own efficiency.	
3.4. Delegate responsibilities appropriately to others.	
3.5. Revise plans to take account of changing circumstances.	
4.1. Evaluate own knowledge and performance against:	
<ul><li>standards and benchmarks</li><li>feedback from others.</li></ul>	
4.2. Produce a personal development plan to prioritise own development with clear goals and targets.	
4.3. Produce a personal development plan which identifies learning opportunities that meet objectives and reflect own learning style.	
4.4. Establish a process to evaluate the effectiveness of own professional development plan.	
4.5. Evaluate how own practice has been improved through:	
<ul> <li>reflection on feedback from others</li> <li>reflection on failures and mistakes, successes and achievements</li> <li>implementation of the professional development</li> </ul>	
plan. Learners will need the sign-off section declaring own work.	
Learners will need the sign-on section declaring own work.	

#### Examples of evidence for the learner portfolio

- 360° approach
- coaching and mentoring activity
- commissioning reports
- continuous professional development (CPD)
- evaluation and reflective development planning
- handover meeting reports
- inspection and audit reports
- job description and person specification reviews
- key performance indicators
- learning styles assessment
- management induction standards
- management reports and reviews
- networking activity
- organisational planning
- peer evaluation
- peer feedback
- personal development plans
- quality improvement plans
- reflective cycle and developmental outcomes
- scheduling and task management processes
- skills and knowledge gap analysis
- skills matching exercises
- supervision and appraisal
- SWOT analysis
- technology use
- workforce development plan.

Learner and Assessor sign-off			
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.		
PIN:			
	Learner signature:		
Centre no:	Date:		
ULN:			
Assessor name:	Assessor sign-off of completed unit: DILMAC 8D		
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.		
	Assessor signature:		
	Date:		
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.			

## Theme 8: Vision and strategy

DILMAC 10A: Decision-making in adult care				
Unit reference: T/616/1085Unit level: 5Credit: 3Guided Learning: 25 hours				
<b>Unit aim:</b> The aim of this unit is to provide learners with the knowledge, understanding and skills required for effective decision-making in adult care.				

Learning Outcome 1: Understand effective decision-making				
Content requirements for Learning Outcome 1:				
Knowledge that learners must develop in this unit.				
1.1. Purposes of and situations in which managerial decisions are required in adult care:				
<ul> <li>local and national policy demands</li> <li>service philosophy, culture and values</li> <li>organisational strategy</li> <li>business and sustainability needs</li> <li>outcomes</li> <li>risk management</li> <li>best interest decisions</li> <li>advanced decisions</li> <li>recruitment</li> <li>ethical issues.</li> </ul>				
1.2. The role of evidence-based decisions in improving quality:				
<ul> <li>models of quality management (eg total quality management (TQM), EFQM excellence model, ISO 9000)</li> <li>effective, safe and efficient decision-making and outcomes</li> <li>value-based and ethical considerations</li> <li>set, monitor and review standards</li> <li>support planning and development</li> <li>measure impact</li> <li>educate and inform.</li> </ul>				
1.3. Key stages in formal and informal decision-making processes:				
<ul> <li>models of decision-making (eg rational, intuitive)</li> </ul>				
1.4. The relationship between data, information and intelligence:				
<ul> <li>definitions of data, information and intelligence</li> <li>interrelationship between data, information and intelligence</li> <li>data collection, information processing, analysis and production</li> <li>national minimum data set (NMDS).</li> </ul>				

- 1.5. How to analyse and use data to ensure decisions are evidence-based:
  - mechanisms, tools and models to aid analysis
  - inquiry
  - problem solving
  - critical thinking
  - consideration of research, experiential and contextual evidence
  - SWOT
  - PEST
  - value chain analysis.
- 1.6. The purposes and benefits of engaging with **individuals** and **others** and respecting their contributions during the decision-making process:
  - integrated services
  - broad perspective
  - utilise expertise and resources
  - team morale
  - ownership
  - accountability
  - manage bias
  - service user and carer involvement strategies
  - positive outcomes
  - personalisation
  - active participation

1.7. The range of stakeholders to whom decisions may need to be communicated:

- organisational
- local safeguarding protocols
- commissioners
- informal care team
- multi agency/disciplinary partners
- individuals
- others: carers, family members, friends, advocates, paid workers and other professionals
- consider data protection, Caldicott principles and information governance.

1.8. The importance of reviewing decisions made and the decision-making process:

- limitations and boundaries
- performance assessment and critical evaluation of impact
- action planning and recording processes
- continuous improvement
- reflective practice.

#### Learning Outcome 2: Carry out effective decision-making

#### Content requirements for Learning Outcome 2:

Skills that learners must develop in this unit

- 2.1. Research relevant and accurate information.
- 2.2. Engage others in the decision-making process.
- 2.3. Structure factual data, recommendations, suggestions and ideas in a logical and meaningful way.
- 2.4. Review all available information and make a valid decision.
- 2.5. Present conclusions and rationale cogently to different stakeholders in order for decisions to win support.
- 2.6. Review the decision-making process including:
  - own research and thought processes
  - the contributions made by others
  - the impact of decisions made.
- 2.7. Record and disseminate learning points to improve future decision-making in the service.

### Unit glossary of terms

Active participation: A way of working that recognises an individual's right to participate in the activities and relationships of everyday life as independently as possible; the individual is regarded as an active partner in their own care or support, rather than a passive recipient.

**Carer**: A person who provides unpaid support to a partner, family member, friend or neighbour who could not manage without this help.

**Data**: Includes research, reports, statistics, internal and external feedback, suggestions, complaints.

Individual: The person using the care or support service.

Others may include:

- individuals
- carers, family members and friends
- advocates
- paid workers
- other professionals.

**Outcome**: An aim or objective that an individual would like to achieve or which needs to happen – for example, continuing to live at home, or being able to go out and about.

## Producing evidence to meet the assessment requirements

#### Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Discuss purposes of and situations requiring managerial decisions in adult care.	
The discussion <b>must</b> include:	
• a minimum of four (4) situations that would require decision-making at a managerial level.	
1.2. Analyse the role of evidence-based decisions in improving quality.	
1.3. Describe key stages in formal and informal decision-making processes.	
1.4. Consider the relationship between data, information and intelligence.	
1.5. Explain how to analyse and use data to ensure decisions are evidence-based.	
1.6. Explain the need for consultative approaches to decision- making.	
The explanation must include the purposes and benefits of engaging with <b>individuals</b> and <b>others</b> and respecting their contributions during the decision-making process.	
1.7. Explain the range of stakeholders to whom decisions may need to be communicated.	
Use one (1) example of collaboration with own team and stakeholders to reach a decision to support the explanation	

Assessment requirements	Evidence record eg page number and method
1.8. Discuss the importance of reviewing decisions made and the decision-making process.	
2.1. Research relevant and accurate information for effective decision-making.	
2.2. Engage others in the decision-making process.	
2.3. Structure factual data, recommendations, suggestions and ideas in a logical and meaningful way.	
2.4. Review all available information and make a valid decision.	
2.5. Present conclusions and rationale cogently to different stakeholders in order for decisions to win support.	
2.6. Review the decision-making process with own team including:	
<ul> <li>own research and thought processes</li> <li>the contributions made by others</li> <li>the impact of decisions made.</li> </ul>	
2.7. Record and disseminate learning points to improve future decision-making in the service.	
Learners will need the sign-off section declaring own work.	

#### Examples of evidence for the learner portfolio

- analysis and trends reporting
- care planning cycle
- commissioners' reports
- co-production activity
- cost benefit analysis
- care quality commission notifications
- feedback channels and tools
- financial reviews
- focus groups
- inspection reports and audits
- management meetings and reports
- mental capacity activity and advocacy
- networking activity
- national minimum data set (NMDS) returns
- organisational evaluation
- partnership activity
- personal development plans
- policy and procedural development
- quality improvement plans
- self-assessment reports
- strategic business plan
- team meetings.

Learner and Assessor sign-off				
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.			
PIN:				
	Learner signature:			
Centre no:	Date:			
ULN:				
Assessor name:	Assessor sign-off of completed unit: DILMAC 10A			
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.			
	Assessor signature:			
	Date:			
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.				

DILMAC 11A: Entrepreneurial skills in adult care			
Unit reference: F/616/1087	Unit level: 5	Credit: 3	Guided Learning: 20 hours
<b>Unit aim:</b> The aim of this unit is to provide learners with the knowledge, understanding and skills required to work collaboratively to support an			

entrepreneurial culture in adult care.

Learning Outcome 1: Understand the market provision for adult care services			
Content requirements for Learning Outcome 1:			
Knowledge that learners must develop in this unit.			
1.1. How services are commissioned, procured and funded:			
<ul> <li>nine standards of commissioning (Commissioning for better outcomes: a route map, October 2015)</li> <li>local arrangements and route maps</li> <li>local authority strategies for finance, performance and care groups</li> <li>balance between cost and quality, financial risk and sustainable market</li> <li>procurement and commissioning protocols</li> <li>agencies and processes for brokering services</li> <li>knowledge of local resources and services</li> <li>contracts and service level agreements.</li> </ul> 1.2. Current drivers shaping adult care, funding mechanisms and related services:			
<ul> <li>NMDS national, regional and local data</li> <li>current outcome measures in commissioning framework</li> <li>promotion of well-being</li> <li>trends and predictions</li> <li>demographics</li> <li>technology</li> <li>resource</li> <li>personalisation</li> <li>integration between health and social care services</li> <li>innovation and alignment of services</li> <li>co-production</li> <li>prevention</li> <li>community capacity</li> <li>whole systems approach</li> <li>development and professionalisation of the workforce</li> <li>public expectations</li> <li>new ways of working.</li> </ul>			

1.3. How own service relates to the wider market:

- market intelligence
- strategy
- development
- service fields of expertise
- value for money
- outcomes.

1.4. Gaps in current market provision:

- local and national data sources to include NMDS and LEPS
- comparator data and benchmarking strategies to inform market position.
- 1.5. The importance of **entrepreneurial skills** in ensuring that the market is able to meet future demand for adult care services:
  - aspirational, visionary and proactive leadership and management approaches
  - responsive and flexible planning
  - resource management
  - economic growth
  - quality improvement
  - adapt to trends, gaps and improvements in provision.

#### Learning Outcome 2: Work with others to support an entrepreneurial culture

#### Content requirements for Learning Outcome 2:

Knowledge and skills that learners must develop in this unit.

- 2.1. Reflect on aspects of the organisation that are no longer effective in providing a person-centred service.
- 2.2. Work with **others** to identify opportunities for growth and development or redesign as a service and a business.
- 2.3. Maintain a culture that:
  - supports innovation, change and growth in relation to the service
  - recognises the resource and expertise of those using or working in the service.

## Unit glossary of terms

**Co-production**: Regarding people who use social care, their families and carers as equal partners in decision-making, recognising that people who use support services and their families have expertise that can be used to help make services better not only for themselves but for others too.

**Entrepreneurial skills**: The skills needed to ensure that the service is able to recognise and proactively adapt to trends, gaps and improvements in the provision of care and support.

Others may include:

- individuals
- carers, family members and friends
- advocates
- paid workers
- other professionals.

**Well-being**: Well-being is a broad concept relating to the following areas in particular: personal dignity, physical and mental health, emotional well-being, protection from abuse and neglect, control over day-to-day life (including control over care and support and the way it is provided), participation in work, education or training, participation in recreation, social and economic well-being, and domestic, family and personal relationships.

#### Assessment of learning

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Discuss how services are commissioned, procured and funded.	
1.2. Discuss current drivers shaping adult care, funding mechanisms and related services	
1.3. Consider how own service relates to the wider market	
1.4. Consider gaps in current market provision	
1.5. Discuss the importance of <b>entrepreneurial skills</b> in ensuring that the market is able to meet future demand for adult care services.	
2.1. Reflect on organisational procedures for person-centred care.	
The reflection <b>must</b> include aspects of the organisation that are no longer effective in providing a person-centred service.	
2.2. Work with <b>others</b> to identify opportunities for growth and development or redesign as a service and a business.	
2.3. Maintain a culture that:	
<ul> <li>supports innovation, change and growth in relation to the service</li> <li>recognises the resource and expertise of those using or working in the service.</li> </ul>	
Learners will need the sign-off section declaring own work.	

Examples of evidence for the learner portfolio			
<ul> <li>change management</li> <li>commissioning</li> <li>communication strategy</li> <li>continuous professional development (CPD)</li> <li>entrepreneurial skills</li> <li>gap analysis</li> <li>inspection and audit reports</li> <li>market positioning</li> <li>networking activity</li> <li>organisational PEST/SWOT</li> <li>partnership activity</li> <li>policy and procedural development</li> <li>quality improvement plans</li> <li>self-assessment</li> <li>strategic business plan</li> <li>sustainability planning</li> <li>team meetings</li> <li>workforce development.</li> </ul>			
Learner and Assessor sign-off			
Learner name: PIN:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.		
1 II <b>N</b> .	Learner signature:		
Centre no:	Date:		
ULN:			
Assessor name:	Assessor sign-off of completed unit: DILMAC 11A I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit. Assessor signature: Date:		
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.			

## DILMAC 11B: Innovation and change in adult care

<b>Unit reference:</b> J/616/1088	Unit level: 5	Credit: 3	Guided Learning: 20 hours
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**Unit aim:** The aim of this unit is to provide learners with knowledge and understanding in relation to innovation and change management in adult care.

## Learning Outcome 1: Understand how to develop a vision for the future of the service

#### Content requirements for Learning Outcome 1:

Knowledge that learners must develop in this unit.

1.1. Own role within the wider organisation in relation to developing a vision for the service:

- governance
- drivers for change
- strategic planning
- business objectives
- team and individual objectives
- evidence-based practice
- align culture and values
- champion continuous improvement
- collaboration and **co-production**
- integrity
- legislation and accountability.
- 1.2. Ways to engage with colleagues and key influencers, including **individuals**, others in the organisation and the local community, regarding the future of the service:
  - leadership and management styles
  - change management (eg Transactional Leadership (Bass 1981), Lewin Model of Change (1947), Tannenbaum and Schmidt: The Leadership Continuum (1973), Transformational leadership (Bass and Bass 2008))
  - engagement strategies
  - collaborative aspirations and shared agendas
  - marketing and promotion
  - empowerment
  - critical support.
- 1.3. Factors likely to have an impact on service provision and the organisation:
  - operating environment insight
  - workforce design and skill base
  - resources.

1.4. How to use evidence-based research, analysis and reflection to:

- formulate options for the future of the service
- develop a vision which is bold, innovative and embodies core values of adult care.
- **data**, information and intelligence from evidence-based research
- considerat the evolving sector and impacting factors
- decision-making
- review outputs and outcomes
- assess readiness for change
- critical path analysis
- risk management
- engage stakeholders.
- 1.5. How to express the vision succinctly in a way which engages and inspires **others**:
  - statement of purpose
  - leadership and management styles
  - communication strategy
  - own the vision
  - provide a context, clear direction and purpose
  - be transparent, open and honest
  - show commitment
  - empower and involve others
  - role model.
- 1.6. How to monitor developments within the adult care system to review own vision and ensure it continues to be relevant, valid and appropriate:
  - current knowledge of legislation, policy, regulation, data and information, evidence-based practice and emerging trends
  - guidance and quality standards
  - evaluation and measurement frameworks
  - monitoring and reviewing processes
  - internal and external audits
  - collaboration and co-production
  - self-assessment
  - reflective practice
  - peer review
  - continuous improvement.

Learning Outcome 2: Understand principles of effective change management

### Content requirements for Learning Outcome 2:

Knowledge that learners must develop in this unit.

- 2.1. Theories and models of change management:
  - application of theories and models, eg Transactional Leadership (Bass 1981), Lewin Model of Change (1947), Tannenbaum and Schmidt: The Leadership Continuum (1973), Transformational leadership (Bass and Bass 2008)
- 2.2. How to use change management tools and techniques to support innovation and business development:
  - understanding, planning, implementing and communicating change
  - leadership and management styles
  - proactive
  - quality cycle
  - change management diagnostic tool
  - establish links between outcomes, causes and effects
  - review and prioritise.

## Unit glossary of terms

**Co-production**: Regarding people who use social care, their families and carers as equal partners in decision-making, recognising that people who use support services and their families have expertise that can be used to help make services better not only for themselves but for others too.

**Data**: Includes research, reports, statistics, internal and external feedback, suggestions, complaints.

Individual: The person using the care or support service.

Others may include:

- individuals
- carers, family members and friends
- advocates
- paid workers
- other professionals.

#### Assessment of learning

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Describe own role within the wider organisation in relation to developing a vision for the service.	
1.2. Consider how to engage with colleagues, key influencers, <b>individuals</b> , and the local community regarding the future of the service.	
1.3. Discuss factors likely to impact on service provision and the organisation.	
1.4. Explain how to use evidence-based research, analysis and reflection to:	
<ul> <li>formulate options for the future of the service</li> <li>develop a vision which is bold, innovative and embodies core values of adult care.</li> </ul>	
1.5. Explain how to express the vision succinctly in a way which engages and inspires <b>others</b> .	
1.6. Explain how to monitor developments within the adult care system to review own vision and ensure it continues to be relevant, valid and appropriate.	
2.1. Evaluate two (2) theoretical models for managing change.	
2.2 Discuss how to use relevant change management tools and techniques to support innovation and business development.	
The discussion <b>must</b> include innovative recommendations for business development in own service.	
Learners will need the sign-off section declaring own work.	

#### Examples of evidence for the learner portfolio

- change management
- contingency plans
- critical path analysis
- evaluation and measurement processes
- focus groups
- inspection reports and audits
- job description
- key performance indicators
- management meetings
- networking activity
- organisational organigram
- organisational PEST/SWOT
- partnership activity
- positioning paper
- quality improvement plans
- risk management
- self-assessment cycle
- statement of purpose
- strategic business plan
- team meetings.

Learner and Assessor sign-off			
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.		
PIN:			
	Learner signature:		
Centre no:	Date:		
ULN:			
Assessor name:	Assessor sign-off of completed unit: DILMAC 11B		
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.		
	Assessor signature:		
	Date:		
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.			

## **Optional Units**

DILMAC 12: Advocacy in adult care				
Unit reference: J/616/1141	Unit level: 5	Credit: 3	Guided Learning: 25 hours	

**Unit aim:** The aim of this unit is to provide learners with knowledge and understanding in relation to advocacy in adult care.

Learning Outcome 1: Understand the purpose of advocacy in relation to adult care

#### Content requirements for Learning Outcome 1:

Knowledge that learners must develop in this unit.

- 1.1. Principles of advocacy:
  - key historical milestones in relation to advocacy
  - advocacy code of practice (Quality Performance Marks QPM)
  - Advocacy Charter
  - promotion of key advocacy principles (to include: clarity of purpose, independence, person-centred approach, empowerment, equal opportunity, accessibility, supporting advocates, accountability, confidentiality, complaints, safeguarding).

1.2. Types of advocacy:

- difference between instructed and non-instructed advocacy
- instructed responsibilities and duties (and who they are to)
- non instructed different approaches (eg rights-based, questioning approach, watching brief, witness observer approach, and person-centred approach).

### Learning Outcome 2: Understand how advocacy is used within legal frameworks

#### Content requirements for Learning Outcome 2:

Knowledge that learners must develop in this unit.

- 2.1. Roles, responsibilities, and accountabilities of advocates and referrers under the Mental Capacity Act (2005):
  - advocacy under the Mental Capacity Act (2005)
  - role of an independent mental capacity advocate (IMCA)
  - role of a deprivation of liberty safeguard representative (DoLS RPR)
  - responsibilities that IMCAs and DoLS RPRs have to the court of protection and the **individual**
  - steps to be taken prior to requesting an advocate (capacity)
  - referral process (local procedures)
  - IMCA role in best interest decision-making.
- 2.2. Roles, responsibilities, and accountabilities of advocates and referrers under the Mental Health Act (2007):
  - advocacy under the Mental Health Act (1983) as amended by the Mental Health Act (2007)
  - role of an independent mental health advocate (IMHA) key duties
  - referral process (local procedures)
  - conditions which must be met to qualify for an IMHA.

### Learning Outcome 3: Understand partnership working in advocacy

#### **Content requirements for Learning Outcome 3:**

Skills that learners must develop in this unit.

- 3.1. Multi-agency and **partnership working** in advocacy:
  - advocacy service commissioners
  - Care Act (2014) and advocacy (key duties)
  - co-production
  - advocacy in domestic abuse situations independent domestic violence advocates (IDVA - key duties), IDVA referral process (local procedure)
  - Multi-Agency Risk Assessment Conference (MARAC).

## Units glossary of terms

**Co-production**: Regarding people who use social care, their families and carers as equal partners in decision-making, recognising that people who use support services and their families have expertise that can be used to help make services better not only for themselves but for others too.

Individual: The person using the care or support service.

**Partnership working**: Working effectively together with professionals, agencies and organisations to enhance well-being and support positive and improved outcomes.

#### Assessment of learning

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Summarise principles of advocacy.	
1.2. Discuss types of advocacy.	
2.1. Explain roles, responsibilities, and accountabilities of advocates and referrers in compliance with the Mental Capacity Act (2005).	
2.2. Explain roles, responsibilities, and accountabilities of advocates and referrers in compliance with the Mental Health Act (2007)	
3.1. Evaluate multi-agency and <b>partnership working</b> in advocacy.	
Learners will need the sign-off section declaring own work.	

Exam	Examples of evidence for the learner portfolio		
	best interest decisions care planning cycle case management coaching and mentoring activity mental capacity assessment networking activity partnership activity referral process risk management training materials and resources workforce development.		

Learner and Assessor sign-off			
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.		
PIN:			
	Learner signature:		
Centre no:	Date:		
ULN:			
Assessor name:	Assessor sign-off of completed unit: DILMAC 12		
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.		
	Assessor signature:		
	Date:		
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.			

DILMAC 13: Assistive technology in adult care					
Unit reference: R/616/1143Unit level: 5Credit: 2Guided Learning: 15 hours					
<b>Unit aim:</b> The aim of this unit is to provide learners with the knowledge, understanding and skills required to lead and manage practice in supporting the use					

of assistive technology.

Learning Outcome 1: Understand the use of assistive technology				
Learning Outcome 1. Onderstand the use of assistive technology				
Content requirements for Learning Outcome 1:				
Knowledge that learners must develop in this unit.				
1.1. Range and availability of assistive technology:				
<ul> <li>types of assistive technology (eg sensors, alarms; detectors; mobility aids; communication aids; posture management; pressure management; moving and handling systems; hospital and community beds; therapy equipment; Telecare; rehabilitation devices)</li> <li>funding</li> <li>role of health services.</li> </ul>				
1.2. How the use of assistive technology supports positive <b>outcomes</b> for <b>individuals</b> :				
<ul> <li>independence</li> <li>privacy</li> <li>confidentiality</li> <li>autonomy</li> <li>mobility</li> <li>access</li> <li>risk management</li> <li>safety</li> <li>security</li> <li>rehabilitation</li> <li>reablement.</li> </ul>				
<ul> <li>1.3. How to facilitate the use of assistive technology:</li> <li>solutions that meet needs</li> <li>risk management</li> <li>assessment and review</li> <li>referral processes</li> <li>secure provision</li> <li>overcome barriers</li> </ul>				
<ul> <li>education, information, guidance, demonstration</li> <li>supporting individuals and <b>others</b> to use assistive technology</li> </ul>				

installation, maintenance and removal of assistive technology.

1.4. Potential conflicts with the use of assistive technology:

- assistive technology as a substitute for direct support
- assistive technology and individuals' human rights
- ethical implications.

## Learning Outcome 2: Lead and manage practice in relation to the use of assistive technology

#### Content requirements for Learning Outcome 2:

Skills that learners must develop in this unit.

2.1. Lead the implementation of systems to support the use of assistive technology.

- 2.2. Evaluate and review practice in supporting the use of assistive technology.
- 2.3. Agree and implement recommendations to develop and improve practice in supporting the use of assistive technology.

## Unit glossary of terms

Individual: The person using the care or support service.

Others may include:

- individuals
- carers, family members and friends
- advocates
- paid workers
- other professionals.

**Outcome**: An aim or objective that an individual would like to achieve or which needs to happen – for example, continuing to live at home, or being able to go out and about.

#### Assessment of learning

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Discuss the range and availability of assistive technology in adult care.	
1.2. Explain how the use of assistive technology supports positive <b>outcomes</b> for <b>individuals</b> .	
1.3. Describe three (3) ways to facilitate the use of assistive technology in adult care.	
1.4. Analyse two (2) potential conflicts with the use of assistive technology in adult care.	
2.1. Lead the implementation of systems to support the use of assistive technology.	
2.2. Evaluate and review practice in supporting the use of assistive technology.	
2.3. Agree and implement recommendations to develop and improve practice in supporting the use of assistive technology.	
Learners will need the sign-off section declaring own work.	

#### Examples of evidence for the learner portfolio

- care planning cycle
- coaching and mentoring
- continuous professional development (CPD)
- inspection reports and audits
- outcomes frameworks
- partnership working activities
- policy and procedural development
- referral documentation
- service evaluation
- team meetings
- training materials used to develop team
- workforce training needs analysis and planning.

Learner and Assessor sign-off			
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.		
PIN:			
	Learner signature:		
Centre no:	Date:		
ULN:			
Assessor name:	Assessor sign-off of completed unit: DILMAC 13		
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.		
	Assessor signature:		
	Date:		
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.			

## DILMAC 14: Business development for adult care

<b>Unit reference:</b> H/616/1146	Unit level: 5	Credit: 3	Guided Learning: 25 hours
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**Unit aim:** The aim of this unit is to provide learners with the knowledge, understanding and skills required to undertake business planning and development.

#### Learning Outcome 1: Understand systems and processes in relation to business planning

#### Content requirements for Learning Outcome 1:

Knowledge that learners must develop in this unit.

- 1.1. Systems and processes in relation to business planning:
  - market conditions and trends
  - competitor and stakeholder analysis
  - governance
  - setting vision and direction
  - plan, implement, monitor, feedback, evaluation and review
  - business strategy and objectives, targets and performance indicators
  - compliance
  - inspections and audits
  - sustainability
  - resource.

## Learning Outcome 2: Understand how to develop a positive culture that supports change and growth

#### Content requirements for Learning Outcome 2:

Knowledge that learners must develop in this unit.

2.1. How to develop a positive culture that supports change and growth:

- existing culture and subcultures
- organisational aspirations
- value-based
- change management
- workforce development
- support mechanisms
- open and transparent communication
- whole systems thinking
- best interest principles
- leadership and management styles.
- health and well-being
  - agreed ways of working.

#### Learning Outcome 3: Undertake business planning and development

#### **Content requirements for Learning Outcome 3:**

Skills that learners must develop in this unit.

- 3.1. Assess the current market position of your business.
- 3.2. Produce a business plan.
- 3.3. Lead the implementation of the business plan.
- 3.4. Evaluate and review the business plan.
- 3.5. Agree and implement recommendations to develop and improve processes and practice in relation to business development.

### Unit glossary of terms

Agreed ways of working: will include policies and procedures where these apply.

**Well-being**: Well-being is a broad concept relating to the following areas in particular: personal dignity, physical and mental health, emotional well-being, protection from abuse and neglect, control over day-to-day life (including control over care and support and the way it is provided), participation in work, education or training, participation in recreation, social and economic well-being, and domestic, family and personal relationships.

## Assessment of learning

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Discuss systems and processes that can be applied to business planning in adult care.	
2.1. Analyse two (2) strategies that can be used to develop a positive culture that supports change and growth.	
3.1. Assess the current market position of your business.	
3.2. Produce a business plan.	
3.3. Lead the implementation of the business plan.	
3.4 Evaluate and review the business plan.	
3.5. Agree and implement recommendations to develop and improve processes and practice in relation to business development.	
Learners will need the sign-off section declaring own work.	

#### Examples of evidence for the learner portfolio

- continuous professional development (CPD)
- inspection reports and audits
- local demographic data
- management meetings
- market positioning paper
- policy and procedural development
- quality assurance processes
- quality improvement plan
- service evaluation
- strategic development plan
- supervision and appraisal
- SWOT analysis
- team meeting
- training materials and resources
- workforce development plan
- business planning meetings.

Learner and Assessor sign-off			
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.		
PIN:			
	Learner signature:		
Centre no:	Date:		
ULN:			
Assessor name:	Assessor sign-off of completed unit: DILMAC 14		
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.		
	Assessor signature:		
	Date:		
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.			

DILMAC 15: Clinical skills in adult care					
Unit reference: K/616/1147Unit level: 5Credit: 4Guided Learning: 35 hours					
<b>Unit aim:</b> The aim of this unit is to provide learners with the knowledge,					

understanding and skills required to undertake clinical activities and lead practice to develop clinical skills in adult care.

## Learning Outcome 1: Understand roles and responsibilities relating to clinical skills in adult care

### Content requirements for Learning Outcome 1:

Knowledge that learners must develop in this unit.

- 1.1. The roles and responsibilities of healthcare practitioners involved in meeting the healthcare needs of **individuals**:
  - **integrated working** with healthcare practitioners
  - healthcare and allied healthcare practitioners
  - working to agreed protocols.
- 1.1. Professional responsibilities and accountability in relation to clinical skills:
  - principles of accountability
  - duty of care
  - duty of candour
  - consent
  - boundaries and limits of own role, responsibilities and competence
  - safe and effective care
  - infection prevention and control
  - evidence-based practice
  - codes of practice (eg Nursing and Midwifery Council).

# Learning Outcome 2: Understand the healthcare needs of individuals using adult care services

#### Content requirements for Learning Outcome 2:

Knowledge that learners must develop in this unit.

- 2.1. Healthcare needs of individuals using adult care services:
  - management of common health conditions (eg cardiovascular disease, diabetes, osteoarthritis, chronic obstructive pulmonary disease, epilepsy, stroke and dementia)
  - acute illness and emergency response
  - support at the end of life
  - physical disabilities
  - current and emerging healthcare needs.
- 2.2. Clinical activities and interventions that can be used to meet the healthcare needs of individuals:
  - assessment and monitoring of health
  - physiological measurements
  - capillary blood samples
  - venepuncture and cannulation
  - respiratory care
  - management and administration of medication via different routes
  - tissue viability and pressure area care
  - continence management, catheter and stoma care
  - wound care
  - therapeutic interventions
  - extended feeding techniques
  - associated skills aseptic technique, moving and positioning techniques
  - reablement techniques (eg assisting with physiotherapy)
  - first response, emergency procedures, CPR and basic life support.
- 2.3. How clinical activities and interventions contribute to the health and **well-being** of individuals:
  - promotion of health and well-being
  - prevention
  - early identification and recognition
  - management of health conditions
  - quality of life
  - inclusion.

## Learning Outcome 3: Assess, monitor and review the healthcare needs of individuals

#### Content requirements for Learning Outcome 3:

Skills that learners must develop in this unit.

- 3.1. Assess, monitor and review the health of individuals using combined methods.
- 3.2. Undertake risk assessments.
- 3.3. Interpret the outcomes of the assessment and plan how to meet healthcare needs of individuals.
- 3.4. Record and report the outcomes of the assessment to ensure safe and effective care.
- 3.5. Lead own team to:
  - monitor individuals' current and emerging healthcare needs
  - maintain healthcare records in line with requirements.

## Learning Outcome 4: Undertake clinical activities to support healthcare needs of individuals

### Content requirements for Learning Outcome 4:

Skills that learners must develop in this unit.

- 4.1. Support the health care needs of individuals using clinical skills and approved techniques.
- 4.2. Follow precautions for the prevention and control of infection.
- 4.3. Promote a person-centred approach throughout clinical activities and interventions.
- 4.4. Monitor, record and report the outcomes of the clinical activities and interventions.

## Learning Outcome 5: Lead practice in the development of clinical skills

#### Content requirements for Learning Outcome 5:

Skills that learners must develop in this unit.

- 5.1. Evaluate the development needs of team members in relation to clinical skills.
- 5.2. Work with healthcare professionals to ensure team members have appropriate training.
- 5.3. Ensure lines of accountability for undertaking healthcare procedures are understood and agreed.
- 5.4. Review practice against professional standards.

## Unit glossary of terms

**Consent**: Informed agreement to an action or decision; the process of establishing consent will vary according to an individual's assessed capacity to consent.

Individual: The person using the care or support service.

**Integrated working**: Coordinated health and social care that is planned and organised around the needs and preferences of the individual, their carers and family. Integration may extend to other services, for example housing, that can offer holistic approaches to address individual circumstances.

**Well-being**: Well-being is a broad concept relating to the following areas in particular: personal dignity, physical and mental health, emotional well-being, protection from abuse and neglect, control over day-to-day life (including control over care and support and the way it is provided), participation in work, education or training, participation in recreation, social and economic well-being, and domestic, family and personal relationships.

## Assessment of learning

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Discuss the roles and responsibilities of healthcare practitioners involved in meeting the healthcare needs of <b>individuals</b> .	
1.2. Discuss professional responsibilities and accountabilities in relation to clinical skills.	
2.1. Describe healthcare needs of individuals using adult care services.	
2.2. Explain two (2) clinical activities and interventions that can be used to meet the healthcare needs of individuals.	
2.3. Analyse how clinical activities and interventions contribute to the health and well-being of individuals.	
3.1. Assess, monitor and review the health of individuals using combined methods.	
3.2. Undertake risk assessments.	
3.3. Interpret the outcomes of the assessment and plan how to meet healthcare needs of individuals.	
3.4. Record and report the outcomes of the assessment to ensure safe and effective care.	
3.5. Lead own team to:	
<ul> <li>monitor individuals' current and emerging healthcare needs</li> <li>maintain healthcare records in line with requirements.</li> </ul>	

Assessment requirements	Evidence record eg page number and method
4.1. Support the healthcare needs of individuals using clinical skills and approved techniques.	
4.2. Follow precautions for the prevention and control of infection.	
4.3. Promote a person-centred approach throughout clinical activities and interventions.	
4.4. Monitor, record and report the outcomes of clinical activities and interventions.	
5.1. Evaluate the development needs of team members in relation to clinical skills.	
5.2. Work with healthcare professionals to ensure team members have appropriate training.	
5.3. Ensure lines of accountability for undertaking healthcare procedures are understood and agreed.	
5.4. Review practice against professional standards.	
Learners will need the sign-off section declaring own work.	

#### Learners will need the sign-off section declaring own work.

#### Examples of evidence for the learner portfolio

- care planning cycle
- clinical records
- continuous professional development (CPD)
- healthcare protocols
- partnership activity
- policy and procedural development
- risk management
- supervision and appraisal
- workforce development.

Learner and Assessor sign-off			
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.		
PIN:			
	Learner signature:		
Centre no:	Date:		
ULN:			
Assessor name:	Assessor sign-off of completed unit: DILMAC 15		
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.		
	Assessor signature:		
	Date:		
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.			

DILMAC 16: Coaching and mentoring in adult care			
Unit reference: T/616/1149Unit level: 5Credit: 3Guided Learning: 25 hours			
<b>Unit aim:</b> The aim of this unit is to provide learners with the knowledge, understanding and skills required to lead and manage coaching and mentoring activities in adult care.			

## Learning Outcome 1: Understand the role of coaching and mentoring in adult social care

#### Unit content requirements for Learning Outcome 1:

Knowledge that learners must develop in this unit.

- 1.1. Models of coaching and mentoring:
  - models of coaching and mentoring eg TGROW five stage, CLEAR and OSKAR models.
- 1.2. The difference between coaching and mentoring:
  - circumstances in which coaching or mentoring would be appropriate
  - short- and long-term
  - informal and formal
  - broad versus specific areas
  - knowledge and experience.
- 1.3. Principles of coaching and mentoring:
  - transformational and change management
  - championing vision and quality
  - learning and development
  - goal setting
  - ethical practice.

#### 1.4. Benefits of coaching and mentoring:

- benefits to individual and organisation
- meeting objectives
- empowerment and capability
- learning culture
- growth, development and achievement
- team dynamics
- widening skills base and upskilling
- career progression
- strengthening induction processes
- improved performance and productivity
- positive culture
- engagement
- reflective practice.

## Learning Outcome 2: Lead and manage coaching or mentoring support in adult care services

#### Content requirements for Learning Outcome 2:

Skills that learners must develop in this unit.

- 2.1. Develop coaching or mentoring processes.
- 2.2. Promote and encourage **others** to use coaching or mentoring to support learning and development.
- 2.3. Plan for and implement coaching or mentoring activities.
- 2.4. Review and evaluate the impact of coaching or mentoring on practice.

#### Unit glossary of terms

Others may include:

- individuals
- carers, family members and friends
- advocates
- paid workers
- other professionals.

### Producing evidence to meet the assessment requirements

#### Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Discuss models of coaching and mentoring.	
The discussion <b>must</b> include an overview of a minimum of two (2) theoretical models of coaching and mentoring in context.	
1.2. Discuss the difference between coaching and mentoring.	
The discussion <b>must</b> include the distinction between approaches to coaching and approaches to mentoring	
1.3. Describe principles of coaching and mentoring.	
1.4. Analyse benefits of coaching and mentoring.	
2.1. Develop coaching or mentoring processes.	
2.2. Promote and encourage <b>others</b> to use coaching or mentoring to support learning and development	
2.3. Plan for and implement coaching or mentoring activities.	
2.4. Review and evaluate the impact of coaching or mentoring on practice.	
Learners will need the sign-off section declaring own work.	

#### Examples of evidence for the learner portfolio

- clarity of coaching and mentoring roles
- coach and mentor selection processes
- coaching and mentoring activity
- continuous professional development (CPD)
- feedback, evaluation and analysis
- individual goal setting and personal targets
- inspection reports and audits
- learning and reflective logs/diaries
- management meetings
- peer evaluation
- performance management
- policy and procedural development
- quality improvement plans
- self-assessment cycle
- skills audit
- standards, indicators and success measures
- supervision and appraisal
- team meetings
- workforce development plan.

Learner and Assessor sign-off		
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.	
PIN:		
	Learner signature:	
Centre no:	Date:	
ULN:		
Assessor name:	Assessor sign-off of completed unit: DILMAC 16	
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.	
	Assessor signature:	
	Date:	
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.		

DILMAC 17: Group living in adult care		
Unit Reference: A/616/1153Unit level: 5Credit: 3Guided Learning: 25 hours		
<b>Unit aim:</b> The aim of this unit is to provide learners with knowledge, understanding		

Learning Outcome 1: Understand theoretical approaches, legislation and regulatory requirements in relation to group living in adult care

and skills required to lead practice to support group living in adult care.

#### Content requirements for Learning Outcome 1:

Knowledge that learners must develop in this unit.

- 1.1. Theoretical approaches to group living in adult care:
  - person-centred practice
  - outcomes-based
  - psychosocial
  - therapeutic approaches
  - group dynamics in a group living environment.

1.2. The impact of legislation and regulatory requirements on group living:

 legislation and regulatory requirements, eg Human Rights Act 1998, Equality Act 2010, Data Protection Act 1998, Mental Capacity Act 2005.

## Learning Outcome 2: Understand how to promote positive outcomes in a group living environment

#### Content requirements for Learning Outcome 2:

Knowledge that learners must develop in this unit.

2.1. How group living can promote positive **outcomes** for **individuals**:

- impact of life experiences in relation to behaviour and responses to group living
- empowerment
- daily living activities to develop positive relationships
- group living activities that meet the needs, preferences and aspirations of individuals
- role of the physical environment.
- 2.2. How ethos and culture in a group living environment influence the **well-being** of individuals:
  - care and support
  - rights and responsibilities
  - inclusion
  - self-esteem
  - resilience
  - tolerance
  - unity
  - consistent expectations.
- 2.3. Inclusive approaches to decision-making in group living:
  - residents' meeting
  - accessible information and guidance
  - democratic approach.
- 2.4. Ways to support individuals to develop and maintain relationships within and beyond the group living environment:

#### • partnership working

- role modelling
- facilitate contacts
- social and group activities
- build skills to develop and maintain positive relationships.
- 2.5. Approaches to resolving conflicts and tensions in group living:
  - policies and procedures
  - accessible complaints procedures
  - staff awareness
  - conflict resolution and problem solving skills
  - diffusion skills
  - mediation, negotiation

• positive behavioural support.

2.6. Resource management to maintain a positive group living environment:

- staffing and work patterns
- equipment
- budgets.

#### Learning Outcome 3: Lead practice to support group living.

#### Content requirements for Learning Outcome 3:

Skills that learners must develop in this unit.

- 3.1. Develop person-centred systems in relation to supporting group living.
- 3.2. Lead the implementation of systems to support group living.
- 3.3. Evaluate and review practice in relation to supporting group living.
- 3.4. Work with **others** to agree and implement recommendations to develop and improve practice to support group living.
- 3.5. Work strategically with others to develop a workforce development plan to advance practice in supporting group living.

#### Unit glossary of terms

Individual: The person using the care or support service.

Others may include:

- individuals
- carers, family members and friends
- advocates
- paid workers
- other professionals.

**Outcome**: An aim or objective that an individual would like to achieve or which needs to happen – for example, continuing to live at home, or being able to go out and about.

**Partnership working**: Working effectively together with professionals, agencies and organisations to enhance well-being and support positive and improved outcomes.

**Well-being**: Well-being is a broad concept relating to the following areas in particular: personal dignity, physical and mental health, emotional well-being, protection from abuse and neglect, control over day-to-day life (including control over care and support and the way it is provided), participation in work, education or training, participation in recreation, social and economic well-being, and domestic, family and personal relationships.

### Producing evidence to meet the assessment requirements

#### Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Analyse two (2) theoretical approaches to group living in adult care.	
1.2. Discuss the impact of legislation and regulatory requirements on group living in adult care.	
2.1. Describe how group living can promote positive <b>outcomes</b> for <b>individuals</b> .	
2.2. Explain the contribution of ethos and culture in a group living environment to the <b>well-being</b> of individuals.	
2.3. Describe inclusive approaches to decision-making in group living.	
2.4. Describe three (3) ways individuals can be supported to develop and maintain relationships within and beyond the group living environment.	
2.5. Evaluate two (2) approaches to resolving conflicts and tensions in group living.	
2.6. Explain effective resource management to maintain a positive group living environment in adult care.	
3.1. Develop person-centred systems in relation to supporting group living.	
3.2. Lead the implementation of systems to support group living.	
3.3. Evaluate and review practice with <b>others</b> in relation to supporting group living.	

Assessment requirements	Evidence record eg page number and method
3.4. Work with others to agree and implement recommendations to develop and improve practice to support group living.	
3.5. Work strategically with <b>others</b> to develop a workforce development plan to advance practice in supporting group living.	
Learners will need the sign-off section declaring own	

work.

Examples of evidence for the learner portfolio				
<ul> <li>C</li> <li>C</li> <li>T</li> <li>C</li> <li>T</li> <li>S</li> <li>S</li> <li>S</li> <li>V</li> <li>T</li> </ul>	audit information complaint records relating to inter-personal relationships within group living documenting how difficulties have been addressed minutes / records of resident / tenant group meetings and outcomes questionnaire feedback from service users record of key work sessions service/tenancy agreement statement of purpose support plan section (social inclusion / encouraging interaction; preferences within private space and social living space) team meeting minutes			

- training and staff development record
- workforce development plan.

Learner and Assessor sign-off		
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.	
PIN:		
	Learner signature:	
Centre no:	Date:	
ULN:		
Assessor name:	Assessor sign-off of completed unit: DILMAC 17	
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.	
	Assessor signature:	
	Date:	
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.		

DILMAC 18: Induction in adult care			
Unit reference: J/616/1155	Unit level: 5	Credit: 3	Guided Learning: 25 hours

**Unit aim:** The aim of this unit is to provide learners with the knowledge, understanding and skills required to lead and manage induction processes and practice in adult care.

### Learning Outcome 1: Understand the induction of staff in adult care services Content requirements for Learning Outcome 1:

### Knowledge that learners must develop in this unit.

- 1.1. Legislation, regulation, codes of practice and policy drivers in relation to induction processes:
  - The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Regulation 18
  - policies and procedures
  - Manager Induction Standards
  - Care Certificate standards
  - integration.

1.2. The purpose of induction for practitioners, **individuals** and organisations:

- competency
- employee rights, expectations and job satisfaction
- safe working practices
- resource investment and return
- orientation
- business objectives and strategy
- quality.

#### 1.3. Resources and methods to support the induction process:

- quality resources
- involvement of individuals and others
- coaching and mentoring
- sourcing specialist expertise
- teaching and learning expertise
- qualifications
- formal and informal networks of support
- learning agreements and schedules
- formative and summative assessment methodologies
- feedback
- reflective practice
- performance management.

#### Learning Outcome 2: Develop induction in adult care services

#### Content requirements for Learning Outcome 2:

Skills that learners must develop in this unit.

- 2.1. Evaluate and review induction processes.
- 2.2. Make and agree recommendations to develop and improve induction processes.
- 2.3. Create a plan to develop and improve induction processes.
- 2.4. Implement plan to develop and improve induction processes.

#### Unit glossary of terms

Individual: The person using the care or support service.

Others may include:

- individuals
- carers, family members and friends
- advocates
- paid workers
- other professionals.

### Producing evidence to meet the assessment requirements

#### Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
<ul><li>1.1. Summarise legislation, regulation, codes of practice and one (1) policy driver in relation to induction processes.</li></ul>	
1.2. Evaluate the purpose of induction for practitioners, individuals and organisations.	
The evaluation must consider induction from the perspective of the practitioner, individuals and organisations.	
1.3. Describe resources and methods to support the induction process.	
2.1. Improve induction in own service through:	
<ul> <li>an evaluation of induction processes a collaborative review of induction processes</li> </ul>	
2.2. Make and agree recommendations to develop and improve induction processes	
2.3 Create a plan to develop and improve induction processes	
2.4. Implement the plan to develop and improve induction processes.	
Learners will need the sign-off section declaring own work.	

#### Examples of evidence for the learner portfolio

- Care Certificate
- contracting and/or sourcing internal and external specialist trainers
- delivery staff
- feedback and evaluation forms
- inspection reports and audits
- involvement of individuals in induction activity
- job descriptions and person specifications
- Management Induction Standards
- management meetings
- organisational structures and responsibilities
- outcome measures and key performance indicators (KPIs)
- personal development plans (PDPs)
- provider information reports
- quality improvement plans
- self-assessment cycle
- Social Care Commitment status
- strategic development plan
- training materials and resources
- value-based recruitment tools and online resources
- workforce development plan.

Learner and Assessor sign-off			
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.		
PIN:			
	Learner signature:		
Centre no:	Date:		
ULN:			
Assessor name:	Assessor sign-off of completed unit: DILMAC 18		
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.		
	Assessor signature:		
	Date:		
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.			

DILMAC 19: Mental capacity in adult care			
Unit reference: R/616/1157Unit level: 5Credit: 3Guided Learning: 25 hours			
<b>Unit aim:</b> The aim of this unit is to provide learners with knowledge and			

**Unit aim:** The aim of this unit is to provide learners with knowledge and understanding in relation to mental capacity in adult care.

## Learning Outcome 1: Understand the provisions of the Mental Capacity Act in relation to adult care

#### Content requirements for Learning Outcome 1:

Knowledge that learners must develop in this unit.

1.1. Current legislation, regulation, and codes of practice in relation to mental capacity:

- Mental Capacity Act (MCA) (2005)
- Mental Capacity Act code of practice
- Care Act (2014) principles in relation to capacity and advocacy
- Advocacy Code of Practice (2014) Deprivation of Liberty Safeguards (DoLS) (2009)
- Deprivation of Liberty Safeguards code of practice to supplement the Mental Capacity Act code of practice
- Equality Act (2010)
- two-stage test (functional test)
- five guiding principles.
- 1.2. Principles of deprivation of liberty:
  - HL v United Kingdom (Bournewood judgement)
  - Article 5 of the European Convention of Human Rights
  - difference between deprivation and restriction upon liberty
  - standard and urgent authorisation
  - referral process to supervisory body
  - Supreme Court ruling on 'Cheshire West' subsequent acid test.

#### Learning Outcome 2: Understand how to work with decision makers

#### Content requirements for Learning Outcome 2:

Knowledge that learners must develop in this unit.

2.1. Roles and responsibilities of an independent mental capacity advocate (IMCA):

- advocacy service standards and codes of practice
- limits and boundaries of independent advocacy
- rights and powers of an independent mental capacity advocate (IMCA)
- instructed and non-instructed advocacy
- referral process.
- 2.2. Best interest decisions under the Mental Capacity Act (2005):
  - decision maker and the decision required
  - best interest principles
  - timely decision-making
  - regular reviewing consider fluctuating capacity
  - views of the individual central to all decision-making (self-advocacy)
  - consider who to involve in decision-making carers, family, friends, professionals.

# Learning Outcome 3: Understand how to work with individuals who lack capacity

#### Content requirements for Learning Outcome 3:

Knowledge that learners must develop in this unit.

- 3.1. How to work with **individuals** who lack capacity:
  - what is the decision to be made?
  - views and wishes of the individual are paramount
  - consider particular needs including communication, mobility, cultural needs
  - range of communication methods
  - principles of liberty and autonomy
  - person-centred models, involvement and care planning
  - awareness of safeguarding matters consider duress
  - unwise decisions (principle of Mental Capacity Act 2005)
  - proactive risk-taking (awareness of paternalism)
  - respect other people's ideas, values and principles
  - consider advanced decisions
  - evidence-based practice.
- 3.2. How to work within adult protection to ensure safety and **well-being** of individuals who lack capacity:
  - safeguarding policies
  - safeguarding referral process and timescales
  - serious case reviews
  - multi-agency working
  - risk management and protection (safety) plans
  - statutory requirements for record keeping and sharing information (confidentiality)
  - role of the Court of Protection
  - role of the Office of the Public Guardian
  - power of attorney ('property and affairs' and 'personal welfare') and deputyship.

### Unit glossary of terms

**Individual**: The person using the care or support service.

**Carer**: A person who provides unpaid support to a partner, family member, friend or neighbour who could not manage without this help.

**Well-being**: Well-being is a broad concept relating to the following areas in particular: personal dignity, physical and mental health, emotional well-being, protection from abuse and neglect, control over day-to-day life (including control over care and support and the way it is provided), participation in work, education or training, participation in recreation, social and economic well-being, and domestic, family and personal relationships.

### Producing evidence to meet the assessment requirements

#### Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	С	entre no:	PIN:	
name:				

Assessment requirements	Evidence record eg page number and method
1.1. Summarise current legislation, regulation, and codes of practice in relation to mental capacity.	
1.2. Discuss the principles of deprivation of liberty in context of own role.	
2.1. Evaluate the roles and responsibilities of an independent mental capacity advocate (IMCA) in the context of own role.	
2.2. Explain best interest decisions under the Mental Capacity Act (2005).	
3.1. Reflect on processes applied in own service when working with <b>individuals</b> who lack capacity.	
3.2. Evaluate how own service ensures safety and <b>well-being</b> of individuals who lack capacity within adult protection.	
Learners will need the sign-off section declaring own work.	

#### Examples of evidence for the learner portfolio

- best interest decisions
- care planning cycle
- case management and examples
- coaching and mentoring activity
- mental capacity assessment
- networking activity
- partnership activity
- referral process
- risk management
- training materials and resources
- workforce development.

Learner and Assessor sign-off				
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.			
PIN:				
	Learner signature:			
Centre no:	Date:			
ULN:				
Assessor name:	Assessor sign-off of completed unit: DILMAC 19			
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.			
	Assessor signature:			
	Date:			
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.				

DILMAC 20: Recruitment, selection and retention in adult care				
Unit reference: Y/616/1158Unit level: 5Credit: 3Guided Learning: 25 hours				
Unit aim: The aim of this unit is to provide learners with the knowledge,				

understanding and skills required to lead and manage recruitment, selection and retention processes and practice in adult care.

## Learning Outcome 1: Understand legislation, regulation and organisation requirements for recruitment, selection and retention

#### Content requirements for Learning Outcome 1:

Knowledge that learners must develop in this unit.

- 11. Current legislation, regulation and organisational requirements for recruitment, selection and retention:
  - Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 18 and 19
  - employment law
  - safe selection and recruitment
  - disclosure and barring
  - equality, anti-discrimination and protected characteristics
  - recruitment and retention strategy
  - values-based recruitment
  - staffing levels, ratios and skills mix
  - eligibility criteria for working in different care services, eg age limitations
  - induction
  - performance management.
- 1.2. Impact of drivers within adult care on recruitment, selection and retention:
  - systems management quality and safety
  - capacity planning
  - integrated working
  - service redesign and new ways of working
  - initiatives for recruitment and best practice Apprenticeships, sector route-way, pre-employment initiatives, career projects and graduate schemes, ambassadors and sector champions
  - personalisation
  - changing demographics
  - serious case reviews and enquiries
  - values-based.

Learning Outcome 2: Understand the recruitment and selection process.

#### Content requirements for Learning Outcome 2:

Knowledge that learners must develop in this unit.

- 2.1. Stages of recruitment and selection:
  - needs evaluation
  - job description and person specification
  - advertising methodology
  - alignment of selection and interview activity against set specifications
  - unbiased application and selection processes
  - interview techniques and selection tests
  - selection and notification processes
  - involvement of **individuals** in the recruitment and selection process
  - role of human resources.

#### Learning Outcome 3: Understand how to support retention in adult care

#### Content requirements for Learning Outcome 3:

Knowledge that learners must develop in this unit.

- 3.1. How to support retention in adult care:
  - motivational theories
  - clarity of roles, responsibilities and accountabilities
  - induction, appraisal and **supervision**
  - support systems, eg coaching and mentoring
  - training, development and career progression
  - positive culture and values
  - analysis of staff turnover and action planning
  - employment terms and conditions
  - support resilience and well-being
  - change management
  - health and well-being
  - agreed ways of working.

## Learning Outcome 4: Manage recruitment and selection processes in own setting

#### Content requirements for Learning Outcome 4:

Knowledge that learners must develop in this unit.

- 4.1. Lead the implementation of systems in relation to the recruitment and selection of adult care practitioners.
- 4.2. Evaluate and review recruitment and selection processes.
- 4.3. Agree and implement recommendations to develop and improve processes and practice in relation to recruitment and selection.

#### Unit glossary of terms

Agreed ways of working: Will include policies and procedures where these apply.

Individual: The person using the care or support service.

**Integrated working**: Coordinated health and social care that is planned and organised around the needs and preferences of the individual, their carers and family. Integration may extend to other services, for example housing, that can offer holistic approaches to address individual circumstances.

Supervision: Supervision includes but is not limited to annual appraisal processes.

#### Values-based:

Based on person-centred values which include:

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

**Well-being**: Well-being is a broad concept relating to the following areas in particular: personal dignity, physical and mental health, emotional well-being, protection from abuse and neglect, control over day-to-day life (including control over care and support and the way it is provided), participation in work, education or training, participation in recreation, social and economic well-being, and domestic, family and personal relationships.

#### Producing evidence to meet the assessment requirements

#### Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Explain current legislation, regulation and organisational requirements for recruitment, selection and retention.	
1.2. Analyse the impact of two (2) drivers within adult care on recruitment, selection and retention.	
The analysis must include:	
<ul> <li>drivers impacting adult care</li> <li>impact of drivers on recruitment, selection and retention.</li> </ul>	
2.1. Describe stages within the recruitment and selection process.	
3.1. Evaluate three (3) strategies to support retention in adult care.	
4.1. Lead the implementation of systems in relation to the recruitment and selection of adult care practitioners.	
4.2. Evaluate and review recruitment and selection processes.	
4.3. Agree and implement recommendations to develop and improve processes and practice in relation to recruitment and selection.	
Learners will need the sign off section declaring own work.	

#### Examples of evidence for the learner portfolio

- benefits of investing in staff
- coaching and mentoring activity
- compliance with regulations for employment
- continuous professional development (CPD)
- inspection reports and audits
- involvement of individuals in recruitment and induction activity
- leadership and management methods, principles and approaches relevant to the recruitment, selection and retention of staff in care services
- organisational information for applicants
- performance management
- policy and procedural development
- pre-selection criteria, eg job adverts, job descriptions, person specifications
- quality improvement plan
- role modelling
- strategic development plan
- supervision and appraisal
- terms and conditions
- up-to-date approaches to care
- values-based recruitment
- workforce development plans.

Learner and Assessor sign-off			
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.		
PIN:			
	Learner signature:		
Centre no:	Date:		
ULN:			
Assessor name:	Assessor sign-off of completed unit: DILMAC 20		
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.		
	Assessor signature:		
	Date:		
	d, providing the learner has a personalised and cure login.		

DILMAC 21: Research in adult care			
Unit reference: R/616/1160	Unit level: 5	Credit: 8	Guided Learning: 55 hours
<b>Unit aim:</b> The aim of this unit is to provide learners with the knowledge, understanding and skills required to conduct research in adult care.			

The evidence produced for this unit will be the research planning and project.

#### Learning Outcome 1: Understand research approaches and methodologies

#### Content requirements for Learning Outcome 1:

Skills that learners must develop in this unit.

- 1.1. Research approaches and methodologies:
  - primary and secondary research
  - qualitative and quantitative
  - empirical or theoretical
  - exploratory
  - descriptive
  - analytical
  - predictive
  - methods of enquiry (eg checklists, surveys, questionnaires, experiments, observation, interviews, action research)
  - cause and effect measurements, document reviews, focus groups and case studies
  - ethical considerations.
- 1.2. Key stages in a research project:
  - propose a topic
  - devise a research question/hypothesis
  - literature review
  - select appropriate methodology
  - carry out research and data collection
  - data analysis
  - report results, discussion and conclusion
  - make recommendations.
- 1.3. Tools used to analyse data:
  - statistics
  - tables, graphs, charts, maps, lists
  - trend calculations
  - summaries
  - validity, reliability, variables and parameters.

#### Learning Outcome 2: Plan a research project within adult care

#### Content requirements for Learning Outcome 2:

Skills that learners must develop in this unit.

2.1. Justify a topic for research within adult care.

2.2. Develop a research plan to include:

- topic
- aims and objectives
- research question/hypothesis
- methodology/methodologies.

2.3. Produce a rationale for chosen research methodologies.

2.4. Consider ethical implications that apply to the area of the research project.

2.5. Review literature relevant to the research project.

#### Learning Outcome 3: Conduct a research project within adult care

#### Content requirements for Learning Outcome 3:

Skills that learners must develop in this unit.

- 3.1. Conduct the research using identified research methods.
- 3.2. Record and collate data.

#### Learning Outcome 4: Analyse research findings

#### Content requirements for Learning Outcome 4:

Knowledge that learners must develop in this unit.

- 4.1. Analyse data from own research.
- 4.2. Draw conclusions on the analysis of data.
- 4.3. Make recommendations for adult care provision.

#### Unit glossary of terms

**Data**: Includes research, reports, statistics, internal and external feedback, suggestions, complaints.

#### Producing evidence to meet the assessment requirements

#### Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Consider research approaches and methodologies.	
1.2. Describe key stages in a research project.	
1.3. Discuss three (3) tools used to analyse <b>data</b> .	
2.1. Justify a topic for research within adult care.	
<ul> <li>2.2. Develop a research design plan for own setting to include:</li> <li>topic</li> <li>aims and objectives</li> <li>research question and hypothesis</li> <li>methodology/methodologies.</li> </ul>	
2.3. Produce a rationale for chosen research methodologies. The rationale <b>must</b> include reasons why specific methodologies were selected or rejected.	
2.4. Consider ethical implications that apply to the area of the research project.	
<ul><li>2.5. Review literature relevant to research project.</li><li>The literature review must include the work of four (4) key theories in relation to the selected topic area.</li><li>The work must not exceed 2000 words.</li></ul>	
3.1. Conduct the research following the research plan detailed.	
3.2. Record and collate data.	

Assessment requirements	Evidence record eg page number and method		
4.1. Analyse data from own research.			
4.2. Draw conclusions on the analysis of			
4.3. Make recommendations for adult ca			
Learners will need the sign-off s work.			
Learner and Assessor sign-off			
Learner name:	er name: I declare that the work presented for this use of the sector o		

PIN:			
	Learner signature:		
Centre no:	Date:		
ULN:			
Assessor name:	Assessor sign-off of completed unit: DILMAC 21		
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.		
	Assessor signature:		
	Date:		
For e-portfolio a signature is not required, providing the learner has a personalised and			

secure login.

DILM	DILMAC 22: Specialist areas of care				
<b>Unit reference:</b> H/616/1163	Unit level: 5	Credit: 5	Guided Learning: 40 hours		
<b>Unit aim:</b> Building on the mandatory content, this unit will develop the learner's knowledge, understanding and skills in relation to leading and managing a service within own specialist area of care. Throughout the unit, the learner must apply each learning outcome and related assessment criteria to the specialist area of care within own service.					
The learner will consider the being of individuals within of loss; acquired brain injury; le profound and complex need	wn service (eg o earning disabilit	dementia; phys y; autistic spec	sical disability; sensory strum; substance misuse;		
The learner will then explore the impact of the condition for the holistic care needs of individuals. In order to do this, the learner will be able combine more than one specialist area of care. For example, the learner may wish to focus their leadership and management practice on supporting individuals with dementia, but also have the opportunity to show competence in end of life care; or the learner may wish to focus their practice on supporting individuals with a learning disability, but also show competence in positive behaviour support.					
The learner will then review current research, policy and guidance related to own specialist area of care and reflect on how this informs their practice. This will require the learner to explore services and referral processes within own specialist area of care and will consider how to represent the rights and interests of individuals.					
Understanding and skills in relation to leading and managing outcomes-based, person-centred practice must be evidenced to include reflecting, evaluating, reviewing and developing practice.					
Finally, the learner will be able to further develop their knowledge and skills within related specialist areas of care through devising a training plan.					
Learning Outcome 1: Understand the impact of conditions on the well-being of individuals within own service.					
Unit content requirements for Learning Outcome 1:					
Knowledge that learners must develop in this unit.					
1.1. The impact of conditions on the <b>well-being</b> of <b>individuals</b> within own service:					
<ul> <li>conditions (eg dementia, physical disability; sensory loss; acquired brain injury; learning disability; autistic spectrum; substance misuse; profound and complex needs; multiple conditions; mental health; terminal illness)</li> <li>consider causes, types, signs and symptoms and treatment options</li> </ul>					

impact on physical, social, emotional, and cognitive well-being.

Learning Outcome 2: Understand the impact of conditions on the care of individuals.

#### Content requirements for Learning Outcome 2:

Knowledge that learners must develop in this unit.

- 2.1. The impact of conditions for the care of individuals:
  - conditions (eg dementia, physical disability; sensory loss; acquired brain injury; learning disability; autistic spectrum; substance misuse; profound and complex needs; multiple conditions; mental health; terminal illness)
  - consider combined specialist areas of care (eg dementia and end of life care, learning disability and positive behaviour support, nutrition and hydration).

### Learning Outcome 3: Understand how current research, policy and guidance informs practice in own specialist area of care

#### Content requirements for Learning Outcome 3:

Knowledge that learners must develop in this unit.

3.1. How current research, policy and guidance informs practice in own specialist area of care:

- frameworks and strategies relevant to own specialist area of practice
- developments and research relevant to own specialist area of practice
- application of theory to practice
- evidence-based practice
- impacts of policy and practice guidance on ways of working
- importance of disseminating findings from research.

### Learning Outcome 4: Understand how to access services in order to meet the needs of individuals in own service

#### Content requirements for Learning Outcome 4:

Knowledge that learners must develop in this unit.

4.1. Services to support individuals within own specialist area of care:

- range of specialist services
- assessment of suitability, effectiveness and accessibility.

4.2. Referral processes used to access specialist services:

- eligibility criteria
- procedures for making, receiving and processing referrals
- agreement and **consent** of individual
- sharing information.

### Learning Outcome 5: Understand how to represent the rights and interests of individuals within own specialist area of care

#### Content requirements for Learning Outcome 5:

Knowledge that learners must develop in this unit.

5.1. How to represent the rights and interests of individuals within own specialist area of care:

- local and national self-representative groups and organisations
- co-production
- education and campaigning events in the wider community
- events and activities to promote inclusion
- strategies to challenge discrimination and exclusion
- advocacy.

## Learning Outcome 6: Develop outcomes-based and person-centred practice within own specialist area of care

#### Content requirements for Learning Outcome 6:

Skills that learners must develop in this unit.

- 6.1. Reflect on leading and managing outcomes-based **person-centred practice** within own specialist area of care.
- 6.2. Evaluate and review outcomes-based person-centred practice within own specialist area of care.
- 6.3. Develop and implement a plan to improve outcomes-based person-centred practice within own specialist area of care.
- 6.4. Devise a training plan to develop knowledge and skills in related specialist areas of care.

#### Unit glossary of terms

**Consent**: Informed agreement to an action or decision; the process of establishing consent will vary according to an individual's assessed capacity to consent.

**Co-production**: Regarding people who use social care, their families and carers as equal partners in decision-making, recognising that people who use support services and their families have expertise that can be used to help make services better not only for themselves but for others too.

Individual: The person using the care or support service.

**Person-centred practice**: An approach that puts the person receiving care and support at the centre, treating the individual as an equal partner and ensuring the service fits the person rather than making the person fit the service.

**Well-being**: Well-being is a broad concept relating to the following areas in particular: personal dignity, physical and mental health, emotional well-being, protection from abuse and neglect, control over day-to-day life (including control over care and support and the way it is provided), participation in work, education or training, participation in recreation, social and economic well-being, and domestic, family and personal relationships.

#### Producing evidence to meet the assessment requirements

#### Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Describe the impact of a condition on the <b>well-being</b> of individuals within own service.	
Select one (1) condition requiring specialist care in your service. Describe the impact of this condition to the holistic needs and well – being of individuals.	
2.1. Explain the impact of a condition for the care of individuals.	
The explanation must include care plan documentation outlining the assessment of needs for the individual with the condition referred to in 1.1 and how the holistic needs impact specialist care provision.	
3.1. Discuss how current research, policy and guidance informs own specialist area of care.	
4.1. Analyse services to support individuals within own specialist area of care. A minimum of three (3) services must be analysed.	
4.2. Explain referral processes used to access specialist services.	
5.1. Discuss how to represent the rights and interests of individuals within own specialist area of care.	
6.1. Reflect on leading and managing outcomes-based <b>person-</b> <b>centred practice</b> within own specialist area of care.	
6.2. Evaluate and review outcomes-based person-centred practice within own specialist area of care.	
6.3. Develop and implement a plan to improve outcomes-based person-centred practice within own specialist area of care.	

Assessment requirements	Evidence record eg page number and method
6.4. Devise a training plan to develop knowledge and skills in related specialist areas of care.	
Evidence <b>must</b> include a training plan to develop two (2) further aspects of specialist care.	
Learners will need the sign-off section declaring own work.	· · · · · · · · · · · · · · · · · · ·

#### Examples of evidence for the learner portfolio

- care planning cycle
- coaching and mentoring activity
- continuous professional development (CPD)
- feedback from people who use the services, service user forums, meetings or surveys, comments and complaints
- inspection reports and audits
- networks and forums
- operational and strategic planning
- outcomes frameworks
- partnership working activity
- performance management
- policy and procedural development
- quality measures and national indicators
- referral documentation
- research
- service evaluation
- supervision and appraisal
- team meetings
- training materials and resources used to develop team
- workforce training needs analysis and planning.

Learner and Assessor sign-off			
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.		
PIN:			
	Learner signature:		
Centre no:	Date:		
ULN:			
Assessor name:	Assessor sign-off of completed unit: DILMAC 22		
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.		
	Assessor signature:		
	Date:		
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.			

DILMAC 23: Sexuality and sexual health in adult care				
Unit reference: K/616/1164	Unit level: 5	Credit: 3	Guided Learning: 25 hours	
Unit aim. The aim of this unit is to provide learners with knowledge and understanding				

**Unit aim:** The aim of this unit is to provide learners with knowledge and understanding in relation to sexuality and sexual health.

### Learning Outcome 1: Understand sexuality and sexual health across the lifespan

#### Content requirements for Learning Outcome 1:

Skills that learners must develop in this unit.

- 1.1. The terms sexuality and sexual health:
  - World Health Organization (WHO) definition of sexuality and sexual health.
- 1.2. Sexual development milestones throughout the lifespan:
  - Life stages: infancy, childhood, adolescence, early adulthood, middle adulthood, late adulthood.
- 1.3. How factors impact:
  - sexuality across the lifespan
  - sexual health across the lifespan.
    - information, advice and guidance
    - education
    - cultural, religious and moral beliefs
    - relationships
    - behaviour and lifestyle (eg alcohol and substance abuse)
    - demographics
    - peer pressure
    - perceived risk
    - media and social media
    - delay in/reluctance to accessing services
    - stigma
    - self-esteem and confidence
    - resilience
    - vulnerability
    - mental capacity
    - sexual exploitation and abuse (eg grooming, domestic abuse, gender violence).

### Learning Outcome 2: Understand the support of sexuality and sexual health for individuals

#### Content requirements for Learning Outcome 2:

Knowledge that learners must develop in this unit.

- 2.1. Approaches to promoting sexual health:
  - sexual health education
  - access to services
  - accessible information
  - building resilience
  - safe use of social media
  - behaviour change
  - advocacy
  - collaborative working
  - safeguarding.

2.2. National and local interventions to promote sexual health:

- Public Health England health promotion for sexual and reproductive health and HIV 2016-2019
- Public Health Outcomes Framework
- model of influences on safer sex practice (Department of Health)
- Joint Strategic Needs Assessment (JSNA)
- whole system commissioning
- demographic profile and local priorities
- epidemiology and trends
- risk reduction strategies
- strategies to support 'hard to reach' groups
- priority areas
- prevention
- role of own organisation.

2.3. Specialist services and agencies for the support of sexuality and sexual health:

- clinical services
- counselling and psychosexual services
- family support workers
- mental health services
- interpreting services
- advocacy services
- Sexual Assault and Referral Centres (SARCs).

#### Unit glossary of terms

Individual: The person using the care or support service.

#### Producing evidence to meet the assessment requirements

#### Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Define the terms:	
<ul><li>sexuality</li><li>sexual health.</li></ul>	
1.2. Describe sexual development milestones throughout the lifespan.	
1.3. Explain how factors impact:	
<ul><li>sexuality across the life span</li><li>sexual health across the life span.</li></ul>	
2.1. Discuss approaches to promoting sexual health.	
2.2. Analyse national and local interventions to promote sexual health.	
The analysis must include:	
<ul> <li>one (1) national intervention and how it is implemented at local level to promote sexual health.</li> </ul>	
2.3. Evaluate specialist services and agencies for the support of sexuality and sexual health.	
Learners will need the sign-off section declaring own work.	

#### Examples of evidence for the learner portfolio

- care planning cycle
- policy and procedural development
- research
- statement of purpose
- training materials and resources
- values statement
- workforce development.

Learner and Assessor sign-off		
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.	
PIN:		
	Learner signature:	
Centre no:	Date:	
ULN:		
Assessor name:	Assessor sign-off of completed unit: DILMAC 23	
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.	
	Assessor signature:	
	Date:	
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.		

DILMAC 24: Transitions in adult care			
Unit reference: T/616/1166	Unit level: 5	Credit: 4	Guided Learning: 30 hours
Unit sime. The sime of this wait is to provide learners with the knowledge			

**Unit aim:** The aim of this unit is to provide learners with the knowledge, understanding and skills required to lead and manage practice to support transitions in adult care.

Learning Outcome 1: Understand transitions in adult care			
Content requirements for Learning Outcome 1:			
	Knowledge that learners must develop in this unit.		
1.1. Theories a	1.1. Theories and approaches in relation to transitions in adult care:		
•	<ul> <li>transition as a process</li> <li>theories (eg Kubler-Ross, Erikson's stages of psychosocial development)</li> <li>collaborative care model</li> </ul>		
1.2. Legislation	n, policy and guidance in relation to transitions in adult care:		
•	relevant legislation, policy and guidance changing priorities integration personalisation funding and resource referral process eligibility criteria associated with different services/life stages commissioning services mental capacity, <b>consent</b> and best interests findings from serious care reviews.		
1.3. Types of transitions in adult care:			
• • • • •	transition from children and young people's services to adult services between different services at life stages and during life events self-directed support as a result of changes in provision or funding education to employment short and long-term transitions.		

## Learning Outcome 2: Understand the support required for individuals during transitions

#### Content requirements for Learning Outcome 2:

Knowledge that learners must develop in this unit.

- 2.1. The impact of transition on **individuals**:
  - life stages and events
  - physical, social, emotional and cognitive well-being.
- 2.2. Factors which contribute to positive transitions:
  - extrinsic (eg level of support, planned or unplanned, philosophy of service, resources, positive relationships)
  - intrinsic (eg individual needs and preferences, perceptions, aspirations, resilience, coping strategies).

2.3. How to support individuals through transitions:

- mainstream and specialist services
- communication
- preparation and planning
- active participation
- person-centred approaches
- solution focused approach
- advocacy
- independent mental capacity advocate (IMCA)
- maintaining contact
- risk management
- duty of care
- safeguarding.
- 2.4. **Partnership working** to support individuals through transitions:
  - shared aims and outcomes
  - transition plans and reviews
  - collaborative and partnership working
  - co-production
  - manage potential conflicts.

## Learning Outcome 3: Lead and manage practice to support individuals through transitions

#### Content requirements for Learning Outcome 3:

Skills that learners must develop in this unit.

3.1. Develop person-centred systems in relation to supporting individuals through transitions.

3.2. Lead the implementation of systems to support transitions for individuals.

- 3.3. Evaluate and review practice in supporting individuals through transitions.
- 3.4. Agree and implement recommendations to develop and improve practice to support transitions.

#### Unit glossary of terms

Active participation: A way of working that recognises an individual's right to participate in the activities and relationships of everyday life as independently as possible; the individual is regarded as an active partner in their own care or support, rather than a passive recipient.

**Consent**: Informed agreement to an action or decision; the process of establishing consent will vary according to an individual's assessed capacity to consent.

**Co-production**: Regarding people who use social care, their families and carers as equal partners in decision-making, recognising that people who use support services and their families have expertise that can be used to help make services better not only for themselves but for others too.

Individual: The person using the care or support service.

**Partnership working**: Working effectively together with professionals, agencies and organisations to enhance well-being and support positive and improved outcomes.

**Well-being**: Well-being is a broad concept relating to the following areas in particular: personal dignity, physical and mental health, emotional well-being, protection from abuse and neglect, control over day-to-day life (including control over care and support and the way it is provided), participation in work, education or training, participation in recreation, social and economic well-being, and domestic, family and personal relationships.

#### Producing evidence to meet the assessment requirements

#### Assessment of learning

Evidence must meet the assessment requirements as detailed below.

Learner	Centre no:	PIN:	
name:			

Assessment requirements	Evidence record eg page number and method
1.1. Explore two (2) theories and approaches in relation to transitions in adult care.	
The exploration must include:	
<ul> <li>how the theories and approaches relate to practice in own setting.</li> </ul>	
Examples may be used to support the exploration.	
1.2. Discuss legislation, policy and guidance in relation to transitions in adult care.	
The discussion must include the procedures followed in own setting and how practice:	
<ul> <li>supports individuals during transition</li> <li>manages potential conflicts</li> <li>reflects legislation, policy and guidance.</li> </ul>	
1.3. Describe four (4) types of transitions in adult care.	
2.1. Consider the impact of transitions (described in 1.3.) on individuals.	
2.2. Analyse factors which contribute to positive transitions.	
The analysis must include:	
<ul><li>intrinsic factors</li><li>extrinsic factors.</li></ul>	

Assessment requirements	Evidence record eg page number and method
2.3. Explain how to support individuals through transitions.	
2.4. Explain <b>partnership working</b> to support individuals through transitions.	
3.1. Develop person-centred systems in relation to supporting individuals through transitions.	
3.2. Lead the implementation of systems to support transitions for individuals.	
3.3. Evaluate and review practice in supporting individuals through transitions.	
3.4. Agree and implement recommendations to develop and improve practice to support transitions.	
Learners will need the sign-off section declaring own work.	

Examples of evidence for the learner portfolio		
•	care planning cycle partnership activity	
•	policy and procedural development	
•	quality improvement plans referral processes	
•	risk management	
•	team meetings transition plans and reviews	

• workforce development.

Learner and Assessor sign-off		
Learner name:	Learner declaration of authenticity: I declare that the work presented for this unit is entirely my own work.	
PIN:		
	Learner signature:	
Centre no:	Date:	
ULN:		
Assessor name:	Assessor sign-off of completed unit: DILMAC 24	
	I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.	
	Assessor signature:	
	Date:	
For e-portfolio a signature is not required, providing the learner has a personalised and secure login.		

Section 4: Mapping to relevant standards

#### Mandatory units

The following tables show each mandatory unit (grouped by the Management Induction Standards (MIS)) and links to relevant QCF units, National Occupational Standards (NOS), Management Induction Standards 2016 (MIS) and the Apprenticeship standard for Leader in Adult Care.

<b>Standard 1. Leadership and Management</b> Unit DILMAC 1A: Leadership and management in adult care Unit DILMAC 1B: Team leadership in adult care		
QCF units	LM1c Lead and manage a team within a health and social care or children and young people's setting (H/602/3171) LM 507 Understand professional management and leadership in health and social care or children and young people's settings (F/504/2218) LM 502 Professional practice in health and social care for adults or children and young people (T/504/2197)	
NOS	SCDLMCA2 Lead and manage change within care services SCDLMCA5 Manage the allocation, progression and quality of work in care service provision Core knowledge requirements repeated throughout the Leadership and Management suite especially items K73-87 (Leading and Managing Practice)	
MIS	Standard 1	
Apprenticeship standard	Core knowledge – tasks and responsibilities, leadership, professional development Core skills – tasks and responsibilities, leadership	

Standard 2. Governance and Regulatory Processes Unit DILMAC 2A: Governance of adult care Unit DILMAC 2B: Regulatory processes for adult care		
QCF units	<b>CF units</b> LM 501 Professional practice in health and social care for adults or children and young people (T/504/2197)	
NOS	SCDLMCE3 Lead and manage the quality of care service provision to meet legislative, regulatory, registration and inspection requirements	
MIS	Standard 2	
Apprenticeship standard	Core knowledge – tasks and responsibilities	

Standard 3. Communication Unit DILMAC 3A Communication and information management in adult care		
QCF units	SHC 51 Use and develop systems that promote communication (F/602/2335) LM 502 Develop, maintain and use records and reports (A/504/2198)	
NOS	SCDLMCE1 Lead and manage effective communication systems and practice SCDHSC 0434 Lead practice for managing and disseminating records and reports	
MIS	Standard 3	
Apprenticeship standard	Core knowledge – tasks and responsibilities, communication Core skills – tasks and responsibilities, communication	

Standard 4. Relationships and partnership working Unit DILMAC 4A: Partnership working in adult care		
QCF units	M2C Work in partnership in health and social care or children and young people's settings (A/602/3189) LM 504 Lead practice in assessing and planning for the needs of families and carers (A/504/2217)	
NOS	SCDLMCD1 Lead and manage work with networks, communities, other professionals and organisations for care service provision SCDLMCB4 Lead practice that involves key people to achieve positive outcomes	
MIS	Standard 4	
Apprenticeship standard	Core knowledge – tasks and responsibilities Core skills - tasks and responsibilities	

Standard 5. Person-centred practice for positive outcomes Unit DILMAC 5A: Outcomes-based person-centred practice in adult care Unit DILMAC 5B: Equality, diversity and inclusion in adult care Unit DILMAC 5C: Continuous improvement in adult care	
QCF units	HSCM1 Lead person-centred practice (D/602/2844) M3 Manage health and social care practice to ensure positive outcomes for individuals (M/602/2850) LM 501 Professional practice in health and social care for adults or children and young people (T/504/2197) SHC 53 Champion equality, diversity and inclusion (Y/602/3183)
NOS	SCDLMCB4 Lead practice that involves key people to achieve positive outcomes SCDLMCB2 Lead service provision that promotes the well-being of individuals
MIS	Standard 5
Apprenticeship standard	Core knowledge – tasks and responsibilities, dignity and human rights, health and well-being Core skills – tasks and responsibilities, dignity and human rights, health and well-being

Standard 6. Professional development, supervision and performance management Unit DILMAC 6A: Professional development in adult care Unit DILMAC 6B: Supervision and performance management in adult care	
QCF units	LM2C Develop professional supervision practice in health and social care or children and young people's work settings (M/602/3187) LM 501 Professional practice in health and social care for adults or children and young people (T/504/2197)
NOS	SCDLMCSA1 Manage and develop yourself and your workforce within care services SCDLMCA5 Manage the allocation, progression and quality of work in care service provision
MIS	Standard 6
Apprenticeship standard	Core Knowledge – tasks and responsibilities, professional development Core skills - tasks and responsibilities, professional development

Standard 7. Resources Unit DILMAC 7A: Resource management in adult care	
QCF units	E8 Manage physical resources (K/600/9711)
NOS	SCDLMCE5 Develop operational plans and manage resources to meet current and future demands on the provision of care services
MIS	Standard 7
Apprenticeship standard	Core knowledge – Tasks and responsibilities

Standard 8. Safeguarding, protection and risk Unit DILMAC 8A: Safeguarding and protection in adult care Unit DILMAC 8B: Health and safety in adult care Unit DILMAC 8C: Risk-taking and risk management in adult care Unit DILMAC 8D: Managing concerns and complaints in adult care	
QCF units	LM 503 Lead practice which supports individuals to take positive risks (H/504/2213) M1 Develop health and safety and risk management policies, procedures and practices in health and social care or children and young people's settings (K/602/3172) P1 Safeguarding and protection of vulnerable adults (R/602/2856) P5 Understand safeguarding of children and young people for those working in the adult sector (Y/602/2860)
NOS	SCDLMCB1 Lead and manage practice that promotes the safeguarding of individuals SCDLMCC1 Lead and manage practice for health and safety in the work setting SCDHSC0450 Develop risk management plans to promote independence in daily living SCDLMCB8 Lead and manage provision of care services that supports the development of positive behaviour
MIS	Standard 8
Apprenticeship standard	Core knowledge – tasks and responsibilities, safeguarding Core skills - tasks and responsibilities, safeguarding, health and well-being

Standard 9. Manage self Unit DILMAC 9A: Manage self in adult care	
QCF units	SHC52 Engage in professional development (L/602/2578) LM501 Professional practice in health and social care for adults or children and young people (T/504/2197)
NOS	SCDHSC0033 Develop your practice through reflection and learning SCDLMCA1 Manage and develop yourself and your workforce within care services Knowledge requirements throughout the suite especially K17 and K18 (your practice), K47 and 48 (continuing professional development)
MIS	Standard 9
Apprenticeship standard	Core knowledge – tasks and responsibilities, professional development Core skills - tasks and responsibilities, professional development

Standard 10. Decision-making Unit DILMAC 10A: Decision-making in adult care	
QCF units	LM501 Professional practice in health and social care for adults or children and young people (T/504/2197) LM502 Develop, maintain and use records and reports (A/504/2198) OP 5.25 Undertake a research project within services for health and social care or children and young people (J/602/3499)
NOS	Knowledge requirements throughout the suite especially items K40 (continuing professional development), K71 (handling information) and K77 (leading and managing practice)
MIS	Standard 10
Apprenticeship standard	Core knowledge – tasks and responsibilities Core skills - tasks and responsibilities

<b>Standard 11. Entrepreneurial skills and innovation</b> Unit DILMAC 11A: Entrepreneurial skills in adult care Unit DILMAC 11B: Innovation and change in adult care	
QCF units	LM505 Manage business redesign in health and social care or children or young people's services (J/504/2236)
NOS	SCDLMCA2 Lead and manage change within care services
MIS	Standard 11
Apprenticeship standard	Core knowledge – tasks and responsibilities Core skills - tasks and responsibilities

#### **Optional units**

The following tables show each optional unit and links to relevant QCF units, National Occupational Standards (NOS), Management Induction Standards 2016 (MIS) and relevant frameworks.

DILMAC 12: Advocacy in adult care	
QCF units	ADV 305 Independent Mental Capacity Advocacy(F/502/3295) ADV 306 Independent Mental Health Advocacy (J/502/3296) ADV 307 Providing Independent Advocacy Management (L/502/3297) ADV 308 Providing Independent Advocacy to Adults(R/502/3298) ADV 310 Providing Independent Mental Capacity Advocacy– Deprivation of Liberty Safeguards (F/502/3300)
NOS	SCDLMCSB1 Lead and manage provision of care services that respects, protects and promotes the rights and responsibilities of people
MIS	Standard 8
Relevant frameworks	Advocacy Quality Performance Mark (2014) Advocacy Code of Practice Advocacy Charter (2002)

DILMAC 13: Assistive technology for adult care	
QCF units	SS 5.3 Support the Use of Assistive Technology (H/601/5250)
NOS	SFHCHS239 Enable individuals to use assistive devices and assistive technology
MIS	N/A
Relevant frameworks	Assisted living technology and services: A learning and development framework Adult Social Care Outcomes Framework (2015 to 2016)

DILMAC 14: Business development for adult care	
QCF units	LM 505 Manage business redesign in health and social care or children or young people's services (J/504/2236)
NOS	SCDLMCE5 Develop operational plans and manage resources to meet current and future demands on the provision of care services SCDLMCA2 Lead and manage change within care services
MIS	Standard 11
Relevant frameworks	The Leadership Qualities Framework Integration and Better Carer Fund Framework (2017-2019) Adult Social Care Outcomes Framework (2015-2016)

DILMAC 15: Clinical skills in adult care	
QCF units	N/A
NOS	SFHGEN7 Monitor and manage the environment and resources during and after clinical/therapeutic activities
MIS	N/A
Relevant frameworks	The Code - Professional standards of practice and behaviour for nurses and midwives (2015) UK Core Skills Training Framework (2015) NHS Outcomes Framework (2016-2017)

DILMAC 16: Coaching and mentoring in adult care	
QCF units	O30c Facilitate coaching and mentoring of practitioners in health and social care or children and young people's settings (L/602/2547)
NOS	SCDLMCA1 Manage and develop yourself and your workforce within care services
MIS	Standard 6

Relevant frameworks	The Code of Conduct for Healthcare Support Workers and Adult Social Care Workers in England Skills for Care – Keeping up the Good Work – CPD guide (2010) Francis Report Recommendations (2013) Investors in People
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DILMAC 17: Group living in adult care		
QCF units	P3 Lead and manage group living for adults (T/602/3174)	
NOS	SCDLMCB7 Lead and manage group living provision within care services	
MIS	Standard 5	
Relevant frameworks	Adult Social Care Outcomes Framework (2015 to 2016) The Code of Conduct for Healthcare Support Workers and Adult Social Care Workers in England The Leadership Qualities Framework	

DILMAC 18: Induction in adult care		
QCF units	O35 Manage induction in health and social care or children and young people's settings (T/602/2574)	
NOS	SCDLMCA3 Actively engage in the safe selection and recruitment of workers and their retention in care services	
MIS	Standard 7	
Relevant frameworks         Care Certificate (2015)           The Code of Conduct for Healthcare Support Workers and Adu Social Care Workers in England Investors in People		

DILMAC 19: Mental capacity in adult care		
QCF unitsADV 305 Independent Mental Capacity Advocacy (F/502/3295) ADV 310 Providing Independent Mental Capacity Advocacy – Deprivation of Liberty Safeguards (F/502/3300)		
NOS	N/A	
MIS	Standard 8	

Relevant frameworks	Mental Capacity Act 2005 Code of Practice (2007) National Dementia Strategy – Living well with dementia Adult Social Care Outcomes Framework (2015-2016)
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DILMAC 20: Recruitment, selection and retention in adult care		
QCF units	O16 Recruitment and selection within health and social care or children and young people's settings (R/602/2338)	
NOS	SCDLMCSA3 Actively engage in the safe selection and recruitment of workers and their retention in care services	
MIS	Standard 7	
Relevant frameworks	Values Based Recruitment Framework (Health Education England, 2016) Investors in People The Leadership Qualities Framework	

DILMAC 21: Research in adult care		
QCF units	OP 5.25: Undertake a research project within services for health and social care or children and young people (J/602/3499)	
NOS	N/A	
MIS	Standard 10	
Relevant frameworks	UK Statistics Authority Code of Practice for Official Statistics	

DILMAC 22: Specialist areas of care

QCF units	DEM 501 Lead and manage practice in dementia care (D/504/2212) DEM 301 Understand the process and experience of dementia (J/601/3538) PD OP 3.1 Understand physical disability (J/601/6150) SS 5.6 Support individuals with multiple conditions and/or disabilities (T/601/5253) SS MU 3.1 Understand sensory loss (M/601/3467) SS 5.5 Support individuals with sensory loss with communication (M/601/5252) PD OP 3.3 Understand the impact of acquired brain injury on individuals (Y/601/6167) LD 510 Promote good practice in the support of individuals with autistic spectrum conditions (A/601/5318) ASM1 Recognise indications of substance misuse and refer individuals to specialists (M/601/0648) O32 Lead positive behavioural support (K/602/2572) EOL 308 End of life and dementia care (F/503/8704) EOL 501 Lead and manage end of life care services (T/503/8134)	
NOS	SCDLMCB2 Lead and manage service provision that promotes the well-being of individuals	
MIS	Standard 5	
Relevant frameworks	Standard 5No Health without Mental Health: the mental health strategy for England (2011) National Dementia Strategy Adult Autism Strategy: Statutory Guidance (2015) Skills for Care Common Core Principles to support good mental health and well-being in adult social care Skills for Care Common Core Principles to support self-care Skills for Care Common Core Principles and competences for social care and health workers working with adults at the end of life Skills for Care Common Core Principles for supporting people with dementia Positive behavioural support: a competence framework (2015) Adult Social Care Outcomes Framework (2015-2016) NHS Outcomes Framework 2016-2017	

DILMAC 23: Sexuality and sexual health in adult care		
QCF units	LD OP 307 Principles of supporting individuals with a learning disability regarding sexuality and sexual health (A/601/6274)	
NOS	SCDLMCB2 Lead and manage service provision that promotes the well-being of individuals	
MIS	N/A	
Relevant frameworks	NHS Outcomes Framework 2016-2017	

DILMAC 24: Transitions in adult care		
QCF units	O4 Lead the management of transitions (F/602/2853)	
NOS	SCDLMCB3 Lead and manage the provision of care services that deals effectively with transitions and significant life events	
MIS	Standard 5	
Relevant frameworks		

# Section 5: Assessment and quality assurance information

#### 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 Advisor with full details of your proposed method. It will need formal approval from us before it can be used.

Please refer to the notes relating to **Expert Witness testimony** and **simulation** which follow this table.

Ref	Assessment Method
Α	<ul> <li>Direct observation of learner by Assessor</li> <li>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</li> </ul>
В	Professional discussion
С	<ul> <li>Expert Witness evidence*</li> <li>when directed by the Sector Skills Council or other assessment strategy/principles</li> </ul>
D	Learner's own work products
Н	<ul><li>Portfolio of evidence</li><li>may include simulation**</li></ul>
I	Recognition of prior learning
J	Reflection on own practice in real work environment
к	Written and pictorial information
N	Oral questions and answers

- \* **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.

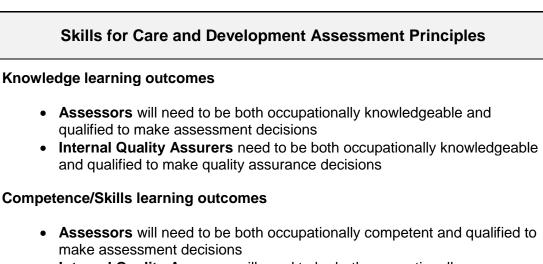
\*\* **Simulation**. A learner's Portfolio of Evidence may only include simulation of skills where simulation is permitted by the relevant assessment strategy/principles.

#### Assessment strategies and principles relevant to this qualification

The units we offer have been developed in line with the specific **assessment strategies or principles** of different Sector Skills Councils (SSCs) or by us where there is no SSC lead.

The key requirements of the assessment strategies or principles that relate to units in this qualification are **summarised** below. More detailed strategies or principles can be found in **Delivering CACHE Qualifications – Assessment and Internal Quality Assurance Guidance**, which can be found on our dedicated qualification website.

The Centre needs to ensure that individuals undertaking Assessor or Quality Assurer roles within your Centre conform to the SSC assessment requirements for the **unit** they are assessing or quality assuring.



• Internal Quality Assurers will need to be both occupationally knowledgeable and qualified to make quality assurance decisions

Section 6: Resources and further reading

#### Resources and further reading

The following resources may be useful for delivery and accessing relevant information.

Organisation	Website
Acas	www.acas.org.uk
Action for Advocacy	www.actionforadvocacy.org.uk
Action on Elder Abuse	www.elderabuse.org.uk
Action on Hearing Loss	www.actiononhearingloss.org.uk
Advocacy QPM	www.qualityadvocacy.org.uk
Age UK	www.ageuk.org.uk
Alzheimer's Society	www.alzheimers.org.uk
Ann Craft Trust	www.anncrafttrust.org
British Sign Language	www.britishsignlanguage.com
Care Knowledge	www.careknowledge.com
Care Quality Commission	www.cqc.org.uk
Carers UK	www.carersuk.org
Centers for Disease Control and	
Prevention	www.cdc.gov
Centre for Health and the Public Interest	
(CHPI)	www.chpi.org.uk
CIPD	www.cipd.co.uk
Citizens Advice	www.citizensadvice.org.uk
Community Care	www.communitycare.co.uk
Cruse Bereavement Care	www.cruse.org.uk
Dementia UK	www.dementiauk.org
Department of Health	www.dh.gov.uk
Dignity in Care Network	www.dignityincare.org.uk
Disability Rights UK	www.disabilityrightsuk.org
Disabled Living Foundation	www.dlf.org.uk
Equality and Human Rights Commission	www.equalityhumanrights.com
Families Leading Planning UK	www.familiesleadingplanning.co.uk
Food Standards Agency	www.food.gov.uk
Foundation for People with Learning	www.learningdisabilities.org.uk
Disabilities	www.iearninguisabilities.org.uk
General Medical Council	www.gmc-uk.org
GOV.UK	www.gov.uk
Health & Care Professions Council	www.hcpc-uk.co.uk
Health and Safety Executive	www.hse.gov.uk
Health Education England	www.hee.nhs.uk
Helen Sanderson Associates	www.helensandersonassociates.co.uk
In Control	www.in-control.org.uk
International Longevity Centre UK	www.ilcuk.org.uk
Joseph Rowntree Foundation	www.jrf.org.uk
Local Enterprise Partnerships Network	www.lepnetwork.net
Local Government Association	www.local.gov.uk
Mencap	www.mencap.org.uk
Mental Health Foundation	www.mentalhealth.org.uk
Mind	www.mind.org.uk

	www.gov.uk/government/organisations/ministry
Ministry of Justice	-of-justice
My Home Life	www.myhomelife.org.uk
National Audit Office	www.nao.org.uk
Autism Research Institute	www.autism.org
National Careers Service	www.nationalcareersservice.direct.gov.uk
National Children's Bureau	www.ncb.org.uk
National Health Service	
	www.nhs.uk www.hra.nhs.uk
NHS Health Research Authority National Institute for Health and Care	<u>www.ma.ms.uk</u>
Excellence	www.nice.org.uk
Nursing and Midwifery Council	www.nmc-uk.org
Office for National Statistics	www.ons.gov.uk
Office of the Public Guardian	www.gov.uk/government/organisations/office-
	of-the-public-guardian
Ofsted	www.gov.uk/government/organisations/ofsted
Patient	www.patient.co.uk
Public Health England	www.phe.org.uk
Respond	www.respond.org.uk
Rethink Mental Illness	www.rethink.org
Royal College of Nursing	www.rcn.org.uk
Royal National Institute of Blind People	www.rnib.org.uk
Save Lives	www.savelives.org.uk
Skills for Care	www.skillsforcare.org.uk
Skills for Health	www.skillsforhealth.org.uk
Skills for Justice	www.sfjuk.com
Social Care Information & Learning Services	www.scils.co.uk
Social Care Institute for Excellence	www.scie.org.uk
Stress Management Society	www.stress.org.uk
Technology to Care	www.technologytocare.org.uk
The Borgen Project – The History of Advocacy	borgenproject.org/history-advocacy/
The Guardian	www.theguardian.com
The King's Fund	www.kingsfund.org.uk
The Makaton Charity	www.makaton.org
The National Council for Palliative Care	www.ncpc.org.uk
The Royal Marsden NHS Foundation	
Trust	www.royalmarsden.nhs.uk
Royal Society for Public Health	www.rsph.org.uk/
The Tavistock and Portman NHS	
Foundation Trust	www.tavi-port.org
Think Local Act Personal	www.thinklocalactpersonal.org.uk
VoiceAbility	www.voiceability.org

### **Section 7: Documents**

#### Useful documents

This section refers to useful documents that can be found on our dedicated qualification website, some of which may assist with the delivery of this qualification.

• Delivering CACHE Qualifications – Assessment and Internal Quality Assurance Guidance

#### Mandatory documents

The completion of an Evidence Record and Record of Assessment Cycle form is **mandatory**. We have devised these templates for your convenience; however, you may design your own forms which comply with the content of our templates.

- CACHE Evidence Record
- CACHE Record of Assessment Cycle

We have also provided notes to guide you when completing these forms:

- Completing the CACHE Evidence Record
- Completing the CACHE Record of Assessment Cycle

The forms and guidance documents are included within **Delivering Our Qualifications – Assessment and Internal Quality Assurance Guidance** on our dedicated qualification website.