NCFE CACHE

NCFE CACHE Level 5 Diploma in Leading and Managing an Adult Care Service
QN: 610/7215/1

Qualification Specification

Approved by skillsforcare

Qualification summary

Qualification title	**NCFE CACHE Level 5 Diploma in Leading and Managing an Adult Care Service**
Ofqual qualification number (QN)	610/7215/1
Guided learning hours (GLH)	805
Total qualification time (TQT)	950
Credit value	95
Minimum age	19
Qualification purpose	This qualification is designed to support the development of registered managers of adult social care services. The qualification provides learners with the knowledge and skills needed to work in adult social care and to have responsibility for leading and managing a service. This will include managing and improving care and support for individuals accessing the service, supporting and developing the workforce, and driving the vision for their service or organisation. • 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.
Grading	Achieved/not yet achieved
Assessment method	Internally assessed and externally quality assured portfolio of evidence
Work/industry placement experience	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 Leading and Managing an Adult Care Service as they will need to show competence in both knowledge and skills.
Apprenticeship/ Occupational standards	This qualification can be undertaken as part of the Leader in Adult Care apprenticeship standard. If learners have not already achieved qualifications in English and mathematics, level 2 Functional Skills in English and mathematics can also be taken. For apprenticeship standards, the latest standard and assessment plan documents, available from Skills England should always be consulted to ensure that all mandatory qualifications, units, assessment, on-the-job hours and apprenticeship conditions are achieved and evidenced.

UCAS	Please refer to the UCAS website for further details of points allocation and the most up-to-date information.
Regulation information	This is a regulated qualification. The regulated number for this qualification is 610/7215/1.
Funding	This qualification may be eligible for funding. For further guidance on funding, please contact your local funding provider.

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Section 1: introduction

Centres must ensure they are using the most recent version of the Qualification Specification on the NCFE website.

Aims and objectives

This qualification aims to:

- focus on the study of leadership and management within the adult care sector
- offer breadth and depth of study, incorporating a key core of knowledge and skills
- provide opportunities to acquire a number of practical and technical skills

The objectives of this qualification are to:

- support the development of registered managers of adult social care services
- specifically develop the leadership and management skills of learners

Support handbook

This Qualification Specification must be used alongside the mandatory Support Handbook which can be found on the NCFE website This contains additional supporting information to help with planning, delivery and assessment.

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

Guidance for entry and registration

This qualification is designed 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.

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

There are no specific prior skills/knowledge a learner must have for this qualification. However, learners will need to be at least 19 years of age and may find it helpful if they have already achieved a level 3 qualification.

Centres are responsible for ensuring that all learners are capable of achieving the learning outcomes and complying with the relevant literacy, numeracy, and health and safety requirements.

Learners registered on this qualification should not undertake another qualification at the same level, or with the same or a similar title, as duplication of learning may affect funding eligibility.

Achieving this qualification

To be awarded this qualification, learners are required to successfully achieve a minimum of **95 credits: 80 credits from the mandatory units** and a minimum of **15 credits from the optional units**.

Please refer to the list of units and themes in appendix A or the unit summaries in section 2 for further information.

To achieve this qualification, learners must successfully demonstrate their achievement of all learning outcomes of the units as detailed in this Qualification Specification. A partial certificate may be requested for learners who do not achieve their full qualification but have achieved at least one whole unit; partial certificate fees can be found in the fees and pricing document on the NCFE website.

Progression

Learners who achieve this qualification could progress to the following:

- employment within the adult care sector in job roles such as:
  - deputy manager
  - manager
  - assistant manager
  - care broker
  - case manager
- further or higher education

Resource requirements

The following documents are mandatory reading for any centre involved in the delivery, assessment and administration of this qualification:

- Skills for Care and Development assessment principles

Work/industry placement experience

The learner must be employed in a managerial role in an appropriate adult care setting to be able to meet the assessment requirements of this qualification.

How the qualification is assessed

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

This qualification is internally assessed and externally quality assured.

The assessment consists of one component:

- an internally assessed portfolio of evidence, which is assessed by centre staff and externally quality assured by NCFE (internal quality assurance (IQA) must still be completed by the centre as usual)

Learners must be successful in this component to gain the Level 5 Diploma in Leading and Managing an Adult Care Service.

Learners who are not successful can resubmit work within the registration period; however, a charge may apply in cases where additional external quality assurance visits are required.

This qualification has been developed to meet Skills for Care's qualification criteria and must be assessed in line with the Skills for Care and Development Assessment Principles.

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

Internal assessment

Each learner must create a portfolio of evidence generated from appropriate assessment tasks, which demonstrates achievement of all the learning outcomes associated with each unit. The assessment tasks should allow the learner to respond to a real-life situation that they may face when in employment. On completion of each unit, learners must declare that the work produced is their own and the assessor must countersign this. Examples of suitable evidence for the portfolio for each unit are provided in section 2.

Each learner must create a portfolio of evidence generated from appropriate assessment tasks to demonstrate achievement of all the LOs associated with each unit. On completion of each unit, learners must declare that the work produced is their own and the assessor must countersign this.

If a centre needs to create their own internal assessment tasks, there are four essential elements in the production of successful centre-based assessment tasks:

- ensuring that the assessment tasks are meaningful with clear, assessable outcomes
- appropriate coverage of the content, learning outcomes, or assessment criteria
- having a valid and engaging context or scenario
- including sufficient opportunities for stretch and challenge for higher attainers

Please see the guidance document for creation of internal assessment tasks on our website.

Please refer to the Skills for Care and Development assessment principles document for further information.

Assessment guidance is provided for each unit. Assessors can use other methods of assessment as long as they are valid, reliable and maintain the integrity of the assessment and of the standards required of this qualification.

Section 2: unit content and assessment guidance

This section provides details of the structure and content of this qualification including grading, level, credit and guided learning hours (GLH).

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

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

Mandatory units

Theme 1 Leading and managing in adult social care

LMAC 1 Leadership and management in adult care (Y/652/0110)

Unit summary				
The aim of this unit is to provide learners with the knowledge and understanding required to lead and manage others within adult care settings.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Mandatory	**Achieved/not yet achieved**	**Level 5**	**4 credits**	**35 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand leadership and management including regulatory, policy, legal requirements and management theories and styles	1.1 Explain the differences between leadership and management
	1.2 Describe key regulatory, policy and legal requirements
	1.3 Describe theories of leadership and management and how they can be used in own role
	1.4 Analyse the range of different leadership styles
	1.5 Explain how **coaching and mentoring** can be used to complement own leadership style
	1.6 Explain potential conflicts that may occur when applying theoretical models of leadership and management
	1.7 Propose strategies to address potential conflicts that may occur when applying theoretical models of leadership and management
2. Understand leadership and management in adult care	2.1 Evaluate the impact of **internal and external drivers** on leadership and management in **adult care services**
	2.2 Explain the role of leadership and management skills in adult care services
	2.3 Explain how to adapt own leadership and management styles for: • **different situations** • **different teams**
	2.4 Describe the interaction between own leadership styles and behaviours and the values and culture of an adult social care organisation
	2.5 Analyse the importance of leadership styles for professional development in adult care
	2.6 Discuss how to establish a culture of continual learning and development in own setting and the importance of learning from experience

Range
1. Understand leadership and management including regulatory, policy, legal requirements and management theories and styles

Range
1.5 Coaching and mentoring including styles and approaches, but not limited to: • self-awareness • situational leadership • directive approach • non-directive approach • blending approaches
2. Understand leadership and management in adult care
2.1 Internal and external drivers: Could include, but are not limited to: • policy or strategy changes • changes to the market • organisational cultural changes or challenges **2.1 Adult care services:** Refers to learner's own care setting. **2.3 Different situations:** Could include, but are not limited to: • the formality of situations • working under different pressures • own role within a particular situation **2.3 Different teams:** Could include, but are not limited to: • size of team • location of team • culture of team • experiences of teams • resources required to manage different teams

Delivery and assessment guidance
This unit must be assessed in accordance with Skills for Care and Development assessment principles guidance. This is a knowledge-based unit. Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment.

Delivery and assessment guidance
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 redesign • 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

LMAC 2 Governance and regulatory processes in adult care (H/652/0114)

Unit summary				
The aim of this unit is to provide learners with knowledge and understanding in relation to the governance of adult care provision.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Mandatory	**Achieved/not yet achieved**	**Level 5**	**5 credits**	**50 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand legislation and statutory guidance that underpins adult care provision	1.1 Summarise current **legislation and statutory guidance** that applies to **all aspects** of service provision
	1.2 Explain own role, accountability and responsibilities in applying legislation and statutory guidance within service provision
	1.3 Explain how duty of candour relates to own role and management of the service
	1.4 Explain the key roles, remit and responsibilities of the: • the registered manager • nominated individual • fit and proper person
	1.5 Analyse the impact of legislation and policy on outcomes-based and person-centred procedures and practice
2. Understand internal governance arrangements within own organisation	2.1 Evaluate internal governance procedures used within own organisation
	2.2 Explain own role in applying, leading and evaluating own service's governance procedures and agreed ways of working
3. Understand systems and requirements for the regulation of adult care services	3.1 Describe specific legislation and regulations that underpin the **inspection system**
	3.2 Describe the range of legislation and statutory guidance that supports and relates to the **inspection process**
	3.3 Summarise the different types of service provision that are subject to registration and inspection
4. Understand the inspection process in adult social care	4.1 Describe how services are inspected
	4.2 Explain the role of the regulator
	4.3 Describe the purpose of the inspection system
	4.4 Summarise the different **types of inspection** and **key themes** of the inspection process
	4.5 Explain how the ratings system is applied and the implications of this
	4.6 Describe when and how **enforcement** action can be used
	4.7 Describe the ways in which information is requested and collected about the service and used to inform inspection activities

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
5. Understand how the inspection process is applied in own service	5.1 Summarise how the requirements of regulation are met within own service
	5.2 Identify those who need to be aware of, and involved in, the inspection process
	5.3 Analyse the range and types of evidence that can be used to demonstrate the service is meeting requirements
	5.4 Describe ways to work with **others** before, during and after the inspection process
	5.5 Review ways to address the outcome and impact of an inspection in own service
	5.6 Review how outcomes of inspection can be used to drive service improvements
6. Understand models of service delivery within adult social care	6.1 Explain the purpose and functions of different **models of service delivery** within adult social care
	6.2 Explain management and governance across models of service delivery
	6.3 Explore innovation and alignment across models of service delivery

Range
1. Understand legislation and statutory guidance that underpins adult care provision
1.1 Legislation and statutory guidance: Must include legislation and relevant guidance specific to adult care and within the wider context of service provision and delivery. **1.1 All aspects:** Relating to all aspects of responsibilities held within own organisation. If the learner is not currently providing regulated activity, then they should explore the formal role of a registered manager.
3. Understand systems and requirements for the regulation of adult care services
3.1 Inspection system and 3.2 Inspection process: As applied in England.
4. Understand the inspection process in adult social care
4.4 Types of inspection: The different inspections carried out by the regulator within adult social care services. **4.4 Key themes:** The areas looked at during the inspection process. **4.6 Enforcement:**

Range
Should include civil and criminal.
5. Understand how the inspection process is applied in own service
5.4 Others could include, but not limited to**:** • local authority teams • safeguarding teams • health professionals • family • relatives • local integrated care systems
6 Understand models of service delivery within adult care
6.1 Models of service delivery: Could include, but are not limited to: • domiciliary services • residential services • supported living/accommodation • extra care services • telecare/remote • shared lives services • community and day services • individual employers • integrated services • telecare and remote services • integrated services

Delivery and assessment guidance
This unit must be assessed in accordance with Skills for Care and Development assessment principles guidance. This is a knowledge-based unit. Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment. 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

Delivery and assessment guidance
• improvement action plan for Care Quality Commission (CQC) 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

LMAC 3 Decision making in adult care (K/652/0116)

Unit summary				
The aim of this unit is to provide learners with the knowledge, understanding and skills required for effective decision-making in adult care.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Mandatory	**Achieved/not yet achieved**	**Level 5**	**3 credits**	**25 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand effective decision-making	1.1 Discuss the different **types of decisions** required in own role
	1.2 Describe key stages in formal and informal decision-making processes
	1.3 Consider the role of data, information and intelligence in making evidence-based decisions to improve quality
	1.4 Explain how own and **others'** values and priorities influence decision-making processes
	1.5 Explain how to enable others to contribute to decision-making
	1.6 Explain the need for consultative approaches to decision-making
	1.7 Explain the range of stakeholders to whom decisions may need to be communicated
	1.8 Discuss the importance of reviewing and evaluating decisions made and the decision-making process to improve quality
2. Be able to demonstrate effective decision-making in own role	2.1 Identify when decisions need to be made
	2.2 Research relevant and accurate data, information and intelligence for effective decision-making
	2.3 Identify a range of potential solutions
	2.4 Evaluate potential solutions and draw conclusions
	2.5 Engage **individuals** and others in the decision-making process and the implementation of the outcome
	2.6 Structure factual data, information, intelligence and recommendations, in a logical and meaningful way
	2.7 Present conclusions and rationale cogently to different stakeholders in order for decisions to win support
	2.8 **Evaluate** the decision and the decision-making process used

Range
1. Understand effective decision-making
1.1 Types of decisions: Could include, but are not limited to: • strategic • tactical • operational • short-term

Range
• long-term **1.4 Others:** In this context, 'others' could include, but is not limited to: • carers, loved ones, family or friends of those accessing care and support services • colleagues and peers • team members • managers and supervisors • professionals from other services, including delivery partners and senior leaders • visitors to the work setting • members of the community • volunteers
2. Be able to carry out effective decision-making
2.5 Individuals: A person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for. **2.8 Evaluate:** Evaluation of the decision and decision-making process must include, but is not limited to: • own research and thought processes • the contributions made by others • the impact of decisions made

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. This is a knowledge and skill-based unit. Knowledge evidence may be generated outside of the work environment, but the final assessment decision must show application of knowledge within the real work environment. Learning outcome 2 is skill-based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in person. It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should not be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process must be agreed with NCFE prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols.

Delivery and assessment guidance
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 (CQC) notifications • feedback channels and tools • financial reviews • focus groups • inspection reports and audits • management meetings and reports • mental capacity activity and advocacy • networking activity • Adult Social Care Workforce Data Set (ASC-WDS) returns • organisational evaluation • partnership activity • personal development plans • policy and procedural development • quality improvement plans • self-assessment reports • strategic business plan • team meetings

LMAC 4 Business and resource management in adult care (R/652/0119)

Unit summary				
The aim of this unit is to provide learners with the knowledge and understanding required to effectively manage resources in adult care.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Mandatory	**Achieved/not yet achieved**	**Level 5**	**4 credits**	**40 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand principles for effective resource management	1.1 Explain the impact of national and local strategies and priorities on resource planning and management, including: • financial resources • physical resources • human resources
	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
	1.7 Explain the importance of business continuity planning and the processes available
2. Understand principles of effective human resource management	2.1 Explain the **legislation, policy and practices** underpinning safe and fair recruitment
	2.2 Describe **approaches** known to improve recruitment and retention of adult care staff
	2.3 Describe **recruitment**, selection and induction processes in the organisation and own role in these
	2.4 Explain the importance of ensuring employment practices are free from discrimination and harassment
	2.5 Describe how to identify the numbers and patterns of staffing required to provide a person-centred, outcomes-based service
	2.6 Analyse **factors** that could influence staffing requirements and patterns
	2.7 Consider how to manage staffing patterns and adjust them to meet changing circumstances in own setting
	2.8 Explain succession and contingency planning for the workforce and ways to achieve this
	2.9 Explain the organisation's **performance management procedures**, and own role in these

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
	2.10 Explain the organisation's conduct, discipline and grievance procedures, and own role in these
3. Understand the market provision in adult social care	3.1 Describe how services are commissioned, procured and funded
	3.2 Evaluate current **local and national drivers** shaping adult care, funding mechanisms and related services gaps in current market provision
	3.3 Consider how own service aligns with the **wider social care landscape** and needs of the **local population,** now and in the future
	3.4 Analyse how own service has evolved and will need to keep changing to meet demand for social care services, now and in the future
	3.5 Discuss the importance of **entrepreneurial skills** in ensuring that the market is able to meet future demand for adult care services
4. Understand integrated approaches in health and social care	4.1 Explain what is meant by an **integrated health and social care system**
	4.2 Explain the **rationale** and legislative context for integrated approaches to service provision
	4.3 Evaluate **local and national initiatives** to better integrate health and social care systems and services
	4.4 Analyse the impact of more integrated systems and processes on **working practices and relationships**

Range
2. Understand principles of effective human resource management

2.1 Legislation, policy and practices:
 	
Could include, but are not limited to:
 	
• Equality Act 2010
• Working Time Regulations 1998
• Care Quality Commission (CQC) regulations
• Disclosure and Barring Service (DBS) checks
• confirming identify and seeking references
• Employment Rights Bill
 	
2.2 Approaches:
 	
Could include, but are not limited to:
 	
• recruiting people with the right values and behaviours
• understanding the local area to inform business planning
• innovative strategies to attract candidates in the local community (for example, referral programmes)
• offering:
  ○ a supportive induction
  ○ quality training
  ○ career progression routes

Range
○ good working conditions ○ rewards ○ recognition ○ flexibility ○ competitive pay rates **2.3 Recruitment:** Could include, but is not limited to: • international recruitment – requiring compliance with Home Office rules • organisational policies and procedures • legal requirements (for example, Equality Act 2010, Employment Rights Bill and safeguarding/DBS checks) • ethical recruitment standards **2.6 Factors:** Could include, but are not limited to: • changing care and support needs of individuals • increases/decreases in demand for support services • holiday/festive periods • sickness • weather conditions **2.9 Performance management procedures:** The policies and procedures used within the service to plan, monitor, develop and improve employees' performance.
3. Understand the market provision in adult social care
3.2 Local and national drivers: Can influence planned outcomes, priorities and day-to-day activities within the service and could include, but are not limited to: • national policies • local initiatives • prevention • integration • personalised care **3.3 Wider social care landscape and local population:** Are essential in addressing the current and future needs of the local population. This involves recognising local and national priorities and could include, but are not limited to:

Range
• prevention • community-based support • reducing health inequalities • promotion of personalised care and support • responding to demographic trends • collaboration **3.5 Entrepreneurial skills:** Are those that leaders need to ensure that the service can meet evolving expectations and demands for adult care services.

Range
4. Understand integrated approaches in health and social care
4.1 Integrated health and social care system: Must include, but is not limited to: • achieving better outcomes for people through a seamless experience • systems working together in a co-ordinated way • building support around the individual **4.2 Rationale:** Must include, but is not limited to: • providing person-centred, compassionate care and support in a way that makes sense to the individual accessing services, to reflect their lives, needs and wishes • changing patterns of population needs (for example, ageing population, complex care and health needs, financial pressures, widening health inequalities, stalling improvements in life expectancy) • prevention and early intervention • move to more community-based practices that break down traditional barriers • digital and technology approaches to enhance and improve practices and person-centred care **4.3 Local and national initiatives:** Could include, but are not limited to: • integrated care systems (ICS) • hospital to communities • prevention-focused strategies • analogue to digital • primary Care Networks • Enhanced health in care homes (EHCH) framework • Ageing Well programme **4.4 Working practices and relationships:** Could include, but are not limited to: • discharge arrangements • integrated assessment and care planning • multi-disciplinary working arrangements • data governance • neighbourhood health agenda • digital data sharing

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. This is a knowledge-based unit. Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment. Examples 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 • equality and anti-discriminatory policies • exit interviews and feedback • induction • inspection reports and audits • job descriptions • operational and resource plans • performance management • 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 • risk management • service redesign • skills audit • staffing profile of skills mix • staffing ratios and rotas • strategic plan • succession planning • supervision and appraisal • systems and approaches to workforce planning • use of agency or temporary staffing • use of information technology in scheduling work patterns • work products designed for recruitment and induction • workforce development plans

Theme 2 Leading and managing teams

LMAC 5 Team leadership in adult care (D/652/0121)

Unit summary				
The aim of this unit is to provide learners with the knowledge and skills required to lead a team within adult care settings.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Mandatory	**Achieved/not yet achieved**	**Level 5**	**3 credits**	**25 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Be able to lead own team	1.1 Adapt leadership styles to reflect different **stages and cycles** in the team's development
	1.2 Establish trust and accountability within the team
	1.3 Build and maintain team commitment to the service and its values
	1.4 Develop, implement and review strategies to support a positive **values-based** culture in the team
	1.5 Model and promote values and behaviours that recognise and champion equality, diversity and inclusion within the team
2. Be able to manage teamwork	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 strengths, skills, interests, knowledge, expertise and development needs
	2.4 Support team members to work towards personal and team objectives and monitor progress
	2.5 Review team objectives and facilitate opportunities for the team to reflect on their progress
	2.6 Provide **constructive feedback** on performance to: • individual team members • the team
	2.7 Work with team members to address any issues with performance and identify opportunities for continuing development
	2.8 Recognise progress towards team and personal work objectives

Range
1. Be able to lead own team
1.1 Stages and cycles: Could include, but are not limited to: • the different stages of team development for example, 'forming, storming, norming and performing'

Range

- the different cycles teams encounter in their work in adult social care; for example, new team members and changes to working practices

1.4 Values-based:

Workplace values are the guiding principles that are most important in the service. They help to define the right and wrong ways of working and help to inform decisions and choices.

Examples could include:

- person-centred values
- strengths-based approaches
- the 6Cs:
  - care
  - commitment
  - communication
  - compassion
  - competence
  - courage
- openness (candour) and a 'just' culture
- supporting a learning culture
- collaboration

2. Be able to manage teamwork

2.6 Constructive feedback:

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

Delivery and assessment guidance

This unit must be assessed in line with Skills for Care and Development assessment principles guidance.

This is a knowledge and skill-based unit. Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment.

Learning Outcomes 1 and 2 are skill-based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in person.

It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should not be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process must be agreed with NCFE prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols.

Delivery and assessment guidance
Examples of evidence for the learner portfolio: • workforce planning • 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

LMAC 6 Team learning and development in adult care (J/652/0124)

Unit summary				
The aim of this unit is to provide learners with the knowledge, understanding and skills of professional development in adult care.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Mandatory	**Achieved/not yet achieved**	**Level 5**	**4 credits**	**35 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand principles of learning and professional development in adult care	1.1 Discuss ways to achieve and the benefits of continually improving: • own knowledge and practice • team's knowledge and practice
	1.2 Explain the range of required and recommended learning and development in adult care
	1.3 Explain the differences between **learning requirements** and continuous professional development
	1.4 Explain the purpose and benefits of **workforce planning and development**
	1.5 Explain the importance of literacy, numeracy and digital skills in adult care and how to develop these skills in the workforce
	1.6 Examine the **core digital skills** required for working in adult care
	1.7 Explain **potential barriers** and constraints in relation to professional development in adult care settings
	1.8 Analyse **factors** to consider when selecting and commissioning activities for learning and professional development
	1.9 Explore **models of reflection** and the importance of reflective practice in improving own and team's performance
2. Be able to lead learning and professional development practices	2.1 Evaluate **available mechanisms and resources** that can support learning and professional development in adult care
	2.2 Promote a **learning culture** within own team
	2.3 Support team members to plan for, achieve and review, their professional development goals
	2.4 Facilitate the development of others to enable effective delegation

Range
1. Understand principles of learning and professional development in adult care
1.3 Learning requirements: Could include, but are not limited to: • induction • statutory • mandatory • service specific specialist learning

Range

1.4 Workforce planning and development:
 	
Workforce planning is an essential part of ensuring that you have the right people with the right attitudes, skills, values and experience providing the care and support the service provides.
 	
1.6 Core digital skills:
 	
Could include, but are not limited to:
 	
• managing information:
  ○ use a remote monitoring system via a smartphone
  ○ update a digital care plan
  ○ update handover records in a skilled way
  ○ work with files, folders and other media to access, organise, store, label and retrieve information
  ○ follow and demonstrate the need for safety and security practices
  ○ create, use and maintain secure passwords
  ○ minimise the risk of computer viruses
• sharing data:
  ○ safely share appropriate data with individuals and others
  ○ safely use password protection
  ○ complete digital records accurately
  ○ store information safely
  ○ safely use insertable and removable storage devices
  ○ use email communication safely
• using digital skills in direct care:
  ○ help individuals use their assistive technology safely
  ○ help someone access online services
  ○ research local activities for an individual or others
  ○ set up and support a remote medical consultation or appointment for an individual
• learning and development:
  ○ create a login and password for a learning account
  ○ print off evidence of learning
  ○ access mobile learning via a table or smartphone
  ○ record learning digitally
  ○ be able to bookmark a page to locate it again
  ○ use search techniques to locate and select relevant information
  ○ be able to recognise currency, bias and copyright when selecting and using information
 	
1.7 Potential barriers:
 	
Could include, but are not limited to:
 	
• internal and external service barriers
• intrinsic and extrinsic barriers
 	
1.8 Factors:

Range

Must include potential barriers and constraints.
 	
1.9 Models of reflection:
 	
Could include, but are not limited to:
 	
• models of learning and reflection, for example:
  ○ Honey and Mumford (1986)
  ○ Schon (1983)
  ○ Jasper (2013)
  ○ Kolb (1984)
  ○ Gibbs (1988)
• principles of critical evaluation
• principles of evidence-based practice

2. Be able to lead learning and professional development practices
2.1 Available mechanisms and resources: Includes traditional methods used for learning and development. Must include advanced approaches with technology within learning and development (for example, remote learning, platforms, e-learning, electronic portfolios). Other examples could include: • 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 **2.2 Learning culture:** Leading practice that embraces, provides opportunity for, and recognises the benefits of learning and professional development.

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. This is a knowledge and skill-based unit.

Delivery and assessment guidance
Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment. Learning Outcome 2 is skill-based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in person. It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should not be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process must be agreed with NCFE prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols. 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

LMAC 7 Supervising others in adult care (L/652/0126)

Unit summary				
The aim of this unit is to provide learners with the knowledge, understanding and skills required to provide professional supervision and performance management in adult care.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Mandatory	**Achieved/not yet achieved**	**Level 5**	**5 credits**	**40 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand the purpose of professional supervision in adult care settings	1.1 Explain how requirements of **legislation**, codes of practice and agreed ways of working influence and structure professional supervision requirements in adult care
	1.2 Discuss the principles, scope and purpose of professional supervision in adult care
2. Understand the process and practice of supervision and performance management	2.1 Discuss different **supervision activities and processes** that can be used in adult care
	2.2 Explain how supervision should be used to support and protect: • the supervisor • the supervisee • individuals, families and carers • the organisation
	2.3 Explain how **external and internal factors** influence practice and can be used within professional supervision objectives
	2.4 Explain why the supervisee's **wellbeing** should be included in effective supervision and how to enable and promote this through supportive practices
	2.5 Explain how supervision can be used alongside appraisal and **professional development processes** to: • develop, improve and enhance performance of the supervisee • support aspirations of the supervisee
	2.6 Discuss factors that can result in a power imbalance during supervision and how to address them
	2.7 Analyse ways to address challenges arising during professional supervision

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
3. Be able to provide regular professional supervision	3.1 Establish understanding and agreement with the supervisee in relation to: • the purpose, frequency and location of supervision activities • actions to be taken in preparation for supervision • sources of data and evidence that can be used to inform supervision • confidentiality, boundaries, roles and accountability
	3.2 Analyse information from a range of sources and perspectives to build an evidence-based understanding of the supervisee's performance
	3.3 Support the supervisee to review their own wellbeing and the range of **strategies** and **support** available to them
	3.4 Support supervisee to reflect on and explore methods of addressing **different situations** in their work
	3.5 Provide constructive feedback to the supervisee that can be used to improve and develop performance
	3.6 Support supervisee to identify, plan and achieve own learning and professional development needs and goals
	3.7 Agree, review and revise targets to meet **objectives of the work setting** and individual professional development goals and objectives of the supervisee
	3.8 Support supervisee to reflect on their practice and professional development goals
	3.9 Record and store outcomes of supervision activities in line with agreed ways of working
	3.10 Adapt own approaches to professional supervision in response to feedback from supervisees and others

Range
1. Understand the purpose of professional supervision in adult care settings
1.1 Legislation: Should include regulations where appropriate.
2. Understand the process and practice of supervision and performance management

Range

2.1 Supervision activities and processes:

Must include formal and informal ways supervision can be planned and provided in the environment, for example:

- group
- individual
- team
- observations of competencies
- validating knowledge
- shadowing activities
- induction and learning processes
- clinical supervision

2.3 External and internal factors:

External factors could include, but are not limited to:

- updated national policy or local procedures
- emerging best practice
- societal movements and campaigns

Internal factors could include, but are not limited to:

- lessons learned/learning reviews
- concerns or complaints
- skills development/training
- emerging needs of individuals accessing services

2.4 Wellbeing:

A broad concept referring to a person's quality of life, considering health, happiness and comfort. In this context, it relates to the wellbeing of the supervisee, in particular mental health, and may also involve aspects of social, emotional, cultural, spiritual, intellectual, economic and physical wellbeing.

2.5 Professional development processes:

Could include, but are not limited to:

- personal development plans
- learning logs
- training and supporting the learner including embedding the Care Workforce Pathway

3. Be able to provide regular professional supervision

3.3 Strategies:

Must include strategies that enable the worker to maintain their wellbeing as well as strategies to implement if indicators of deterioration are recognised. Strategies could also include those that are personal to the worker.

3.3 Support:

Must include offers available inside and outside the workplace, for example:

- internal:
  - supervision
  - employee assistance scheme
  - mentor or buddying systems
- external:
  - self-help tools
  - apps and websites
  - local groups and networks

3.4 Different situations:

Could include challenges the supervisee or team face in their work.

3.7 Objectives of the work setting:

Must include the range of skills required to meet people's needs.

Delivery and assessment guidance

This unit must be assessed in line with Skills for Care and Development assessment principles guidance.

This is a knowledge and skill-based unit. Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment.

Learning Outcome 3 is skill-based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in person.

It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should not be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process must be agreed with NCFE prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols.

Examples of evidence for the learner portfolio:

- 360° approach

Delivery and assessment guidance
• 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

Theme 3 Responsibilities

LMAC 8 Safeguarding in adult care (R/652/0128)

Unit summary				
The aim of this unit is to provide learners with knowledge, understanding and skills in relation to safeguarding and protection in adult care. It also includes safeguarding in relation to adults and children and young people who may come into contact with the service.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Mandatory	**Achieved/not yet achieved**	**Level 5**	**5 credits**	**35 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand requirements for safeguarding in adult care	1.1 Explain the current legislative framework and national guidance that underpins the safeguarding of adults
	1.2 Describe local systems, procedures and agencies relating to adult safeguarding and own role within these
	1.3 Explain how national and local guidelines, policies and procedures for safeguarding affect: • day-to-day work with individuals • own responsibilities towards individuals, their families, carers and team members
	1.4 Explain own role in **leading a response** to suspected or disclosed abuse or neglect
	1.5 Describe how and when to engage **others** in relation to responding to safeguarding concerns
	1.6 Discuss legal provisions in relation to whistleblowing and information sharing
	1.7 Analyse issues relating to consent to share information and own responsibilities to share information about suspicions or disclosures of abuse or neglect
2. Understand how investigations into serious failures inform practice	2.1 Explain how investigations into serious failures to uphold individuals' rights to live free from abuse and neglect have impacted national policy and inform practice

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
3. Be able to lead the implementation of policies and procedures to support safeguarding in adult care	3.1 Ensure that all policies, procedures, systems and processes used in the work setting comply with legal requirements and local and national guidance
	3.2 Embed safeguarding principles throughout all practices, policies and procedures
	3.3 Support team members to develop the knowledge and skills needed to safeguard adults at risk
	3.4 Ensure team members understand their role in responding to concerns about the safeguarding of adults
	3.5 Embed practices that encourage and empower adults at risk, and those who are important to them, to share concerns
	3.6 Plan and implement the **review** and revision of person-centred practices, policies and procedures to ensure continuous improvement in safeguarding adults at risk of abuse or neglect
	3.7 Follow agreed protocols to participate in inter-agency, joint or integrated working in order to achieve the best outcomes for adults at risk
4. Understand local systems for safeguarding children and young people	4.1 Explore local systems, procedures and agencies in relation to safeguarding children and young people and own role within these
5. Be able to support safeguarding of children and young people encountered in an adult social care service	5.1 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 • their role in responding to concerns about the safeguarding of a child or young person, or if disclosure or allegation arises

Range
1. Understand requirements for safeguarding in adult care
1.4 Leading a response: Must include, but is not limited to: • safety and wellbeing of the individual and others where applicable • own actions • own role in implementing, following, and engaging others in policies and procedures • own role in ensuring that the individuals (and others where applicable) are kept informed and involved **1.5 Others:** In this context 'others' refers to those people who may need to be involved in a response, including, but not limited to: • individuals accessing care and support services • carers, loved ones, family or friends of those accessing care and support services • team members

Range
• managers and supervisors • professionals from other services
3. Be able to lead the implementation of policies and procedures to support safeguarding in adult care
3.5 Review: Could include, but is not limited to: • outcomes from safeguarding reviews and investigations • current guidance arising from serious case reviews and its relevance to own organisation • resolution and recovery of the adult at risk Could also include reviewing: • person-centred practices, policies and procedures • when a response is required for external influences that impact internal practices (for example, a pandemic or current reports published by the CQC) • communication and support systems for staff and others within own organisation • how own team/service liaises with others and/or external organisations

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. This is a knowledge and skill-based unit. Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment. Learning Outcome 3 and 5 are skill-based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in person. It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should not be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process must be agreed with NCFE prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols. 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

Delivery and assessment guidance
• quality improvement plans • supervision and appraisal • training materials • workforce development plans

LMAC 9 Mental capacity in adult care (D/652/0130)

Unit summary				
The aim of this unit is to provide learners with knowledge and understanding in relation to mental capacity and restrictive practices.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Mandatory	**Achieved/not yet achieved**	**Level 5**	**3 credits**	**20 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand mental capacity and consent	1.1 Describe links between **consent**, risk management and safeguarding
	1.2 Explain key provisions of **legislation, codes of practice and policy** regarding mental capacity and how these relate to the service
	1.3 Describe own role in applying and upholding the key principles of the mental capacity legislation and code of practice
	1.4 Evaluate the **support available** when mental capacity needs to be assessed, and how to access this support
	1.5 Discuss own role in the assessment of risk in situations where an individual's capacity is a concern
	1.6 Describe practices that support individuals' ability to provide valid consent
	1.7 Clarify own and team members' **development needs** relating to mental capacity and their practice
2. Understand the use and impact of restrictive practices	2.1 Explain the following terms and the application of each to practices within own work setting: • **restrictive practices** • **restraint** • 'deprivation of liberty'
	2.2 Describe the **legal and ethical** considerations of restricting an individual's rights and freedoms
	2.3 Describe **own responsibilities** in relation to restrictive practices and deprivations of liberty
	2.4 Explain **appropriate and proportionate** responses to restrictions on an individual's rights and freedoms
	2.5 Analyse the potential **impacts** of restrictive practices on **individuals** and **others**
	2.6 Discuss how person-centred, outcome-based practices can mitigate the use of restrictive practices
	2.7 Discuss own and team members' **development needs** relating to the use of restrictive practices

Range
1. Understand mental capacity and consent
1.1 Consent: Informed agreement to an action or decision; the process of establishing consent will vary according to an individual's assessed capacity to consent. Links between consent, risk management and safeguarding could include: • principles of mental capacity, consent and decision-making • balance between duty of care and individual rights **1.2 Legislation, codes of practice and policy:** Could include, but is not limited to: • Mental Capacity Act 2005 • Human Rights Act 1998 • Safeguarding Adults • Dignity in Care • Deprivation of Liberty Safeguards 2009 • Care Act 2014 • Making Safeguarding Personal (MSP) **1.4 Support available:** For when mental capacity needs to be assessed, which could include, but is not limited to: • 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 **1.7 Development needs:** Could include, but are not limited to: • best-interest decisions • decision-maker responsibilities • maximising capacity and their role in assessment
2. Understand the use and impact of restrictive practices
2.1 Restrictive practices: Includes any type of practice or intervention that limits the rights or freedoms of movement of an individual.

Range

2.1 Restraint:

Could include, but is not limited to, covert medication (sometimes referred to as 'hidden restraint').

2.2 Legal and ethical:

Could include, but is not limited to:

- statutory principles of the Mental Capacity Act 2005
- Duty of Care
- Deprivation of Liberty Safeguards
- individuals' wishes
- advanced decisions
- decision-making authorities (for example, lasting power of attorney (LPA), Court of Protection request)
- best-interest decisions

2.3 Own responsibilities:

Must include how to apply for an authorisation.

2.4 Appropriate and proportionate:

Appropriate: necessary and justified.

Proportionate: the least restrictive option possible to meet the intended outcome.

May include key principles, but are not limited to:

- rights-based approach
- proportionality
- justification and evidence
- review and monitoring
- leadership
- accountability
- person-centred care

2.5 Impacts:

Could include, but are not limited to, individual impacts on safety, dignity, relationships and wellbeing of individuals. Learners could also consider the impact on team members responsible for implementing restrictions.

2.5 Individuals:

Range
A person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for. **2.5 Others:** In this context, 'others' refers to adult care workers who are required to restrict an individual's rights or freedoms. **2.7 Development needs:** Must include, but are not limited to: • best-interest decisions • decision-maker responsibilities • maximising capacity • their role in assessment.

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. This is a knowledge-based unit. Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment. 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

LMAC 10 Partnerships in adult care (H/652/0132)

Unit summary				
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.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Mandatory	**Achieved/not yet achieved**	**Level 5**	**4 credits**	**35 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand the context of relationships and partnership working	1.1 Explain how **legislation** and **regulation** influence working relationships with **others**
	1.2 Explain how relationships with **individuals** and **carers** underpin person-centred practice and affect the achievement of **positive outcomes** for individuals and their families
	1.3 Evaluate how networking and **working collaboratively** with other agencies and community groups benefits: • individuals • the sustainability and reach of the organisation
	1.4 Analyse how integrated working with other agencies delivers better outcomes for individuals and the role of **systems leadership** within this
	1.5 Explain the methods, protocols and limitations of using **different communication methods** to forge relationships and partnerships with other professionals and agencies
	1.6 Describe good practice for working across agencies in relation to: • the **features** of effective, **collaborative** partnership working • how to overcome barriers to effective partnerships
	1.7 Explain own role and responsibilities in establishing positive relationships within and beyond the organisation

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
2. Be able to lead effective relationships with individuals, carers and families	2.1 Model open, respectful and supportive relationships with individuals, carers and their families
	2.2 Embed **co-production** and the contribution and expertise of individuals, carers and families within day-to-day practice
	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. Be able to manage working relationships with colleagues in own setting to achieve positive outcomes for individuals	3.1 Develop systems and procedures to facilitate effective working relationships with colleagues in the organisation
	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 specific expertise
	3.4 Deal constructively with conflicts or dilemmas that arise
	3.5 Evaluate own working relationships with colleagues
4. Be able to work in partnership with professionals and other agencies	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 Deal constructively with any challenges in ways that promote change, and challenge any poor practice or failure to work in agreed ways
	4.4 Implement and use **communication and recording systems** that comply with current legislation for information sharing between agencies
	4.5 Evaluate the effectiveness of partnership work and the processes that underpin it and seek agreement for improvements

Range
1. Understand the context of relationships and partnership working
1.1 Legislation: Learners should consider how different legislation relates to and influences working with others. Could include, but is not limited to: • Care Act 2014 • Mental Capacity Act 2005 • Health and Social Care Act 2012 • General Data Protection Regulation (GDPR) • data security and protection • subject access requests (SAR) • data control • sharing information • safeguarding

Range
1.1 Regulation: Regulations underpinning the adult social care inspection system in England at the time of publication **1.1 Others:** In this context, 'others' may include agencies and other organisations. **1.2 Individuals:** A person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for. **1.2 Carers:** A person who provides unpaid support to a partner, family member, friend or neighbour who could not manage without this help. This is distinct from a care worker, who is paid to care for people. **1.2 Positive outcomes:** An 'outcome' refers to individuals' aims or objectives; the things individuals want to achieve or need to happen (for example, continuing to live at home or being able to go out and about). **1.3 Working collaboratively:** Working together and focusing on building respectful and positive outcomes with other agencies, professionals and community groups to improve the quality and consistency of care, whilst remaining focused on own desired outcomes, needs and agenda. **1.4 Systems leadership:** Seeks to affect change for good across interconnecting systems (for example, health and social care) through leadership and collaboration that extends the usual limits of resources and responsibility. **1.5 Different communication methods:** Learners must consider a range of communication methods including digital communications. **1.6 Features:** Must include, but are not limited to: • building transparency and sharing information openly and honestly (in line with regulations) • a diversity of skills and perspectives • creating psychological safety within partnerships and teams, which includes a willingness to cooperate and an ability to openly disagree

Range
• an ability to understand and prioritise the needs of other partners, without compromising on your own desired outcomes **1.6 Collaborative:** Working together and focusing on building respectful and positive outcomes with other agencies, professionals and 35 community groups to improve the quality and consistency of care, whilst remaining focused on own desired outcomes, needs and agenda.
2. Be able to lead effective relationships with individuals, carers and families
2.2 Co-production: An equal relationship between individuals accessing a service and the people responsible for the service. They work together to decide the best way to design and deliver services and implement those decisions together. Co-production recognises that people who use social care services (and their families) have knowledge and experiences that can be used to help make services better, not only for themselves but for other people who access social care.
4. Be able to work in partnership with professionals in other agencies
4.4 Communication and recording systems: Learners must consider legislation relating to communication and recording systems that complies with current information sharing between agencies. Should include but is not limited to: • General Data Protection Regulation (GDPR) • Data Protection Act 2018 • formal sharing agreements • Caldicott principles

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. This is a knowledge and skill-based unit. Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment. Learning Outcomes 2, 3 and 4 are skill-based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in person. It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should not be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process must be agreed with NCFE prior to use. This

Delivery and assessment guidance
should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording and storage protocols. 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 and ethical requirements and lessons learned • risk assessments including use of technology • role modelling • safeguarding protocols • self-assessment • service level agreements • supervision and appraisal • team meetings • workforce development

LMAC 11 Comments and complaints in adult care (L/652/0135)

Unit summary				
The aim of this unit is to provide learners with the knowledge, understanding and skills required to manage and learn from comments, concerns and complaints in adult care.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Mandatory	**Achieved/not yet achieved**	**Level 5**	**3 credits**	**20 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand the management of comments, concerns and complaints	1.1 Analyse the relationship between the management of comments, concerns, complaints, risk management and safeguarding
	1.2 Summarise regulatory requirements, codes of practice and guidance for managing comments, concerns and complaints
	1.3 Explain why **individuals** and **others** may be reluctant to raise comments or concerns or make complaints
	1.4 Explore attitudes and approaches that ensure comments, concerns and complaints can prompt continuous improvement of the service
2. Be able to lead practice to listen and respond to comments, concerns and complaints	2.1 Support team members to understand systems and procedures to ensure that individuals' and others' comments, concerns and complaints are listened and responded to
	2.2 Ensure information and support is readily available and accessible to individuals and **carers** who wish to raise comments and concerns and make complaints
	2.3 Enable, encourage and empower individuals and others to raise and follow up on comments, concerns and complaints
	2.4 Implement open and transparent systems and procedures that address and respond to comments, concerns and complaints compassionately and within agreed time frames
	2.5 Use feedback from comments and outcomes from investigations into concerns and complaints to drive improvements to the service

Range
1. Understand the management of comments, concerns and complaints
1.3 Individuals: A person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for. **1.3 Others:** In this context, 'others' could include, but is not limited to: • carers, loved ones, family or friends of those accessing care and support services • colleagues and peers

Range
• team members • managers and supervisors • professionals from other services, including delivery partners and senior leaders • visitors to the work setting • members of the community • volunteers
2. Be able to lead practice to listen and respond to comments, concerns and complaints
2.2 Carers: A person who provides unpaid support to a partner, family member, friend or neighbour who could not manage without this help. This is distinct from a care worker, who is paid to care for people.

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. This is a knowledge and skill-based unit. Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment. Learning Outcome 2 is skill-based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in person. It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should not be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process must be agreed with NCFE prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording and storage protocols. 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

Theme 4 Improvements and innovations

LMAC 12 Leading the vision in adult care (R/652/0137)

Unit summary				
The aim of this unit is to provide learners with knowledge, understanding and skills in relation to developing and implementing a vision and future direction for adult care services.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Mandatory	**Achieved/not yet achieved**	**Level 5**	**3 credits**	**25 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand how to develop a vision for the service	1.1 Describe own role within the wider organisation in relation to developing a vision for the service
	1.2 Discuss how the vision, and future of the service may be affected by a range of factors
	1.3 Explain how to use evidence-based research, analysis and reflection to: • formulate options for the future of the service • develop a vision that is bold, innovative and embodies core values of adult care
	1.4 Explain how to express the vision succinctly in a way that engages and inspires **others**
	1.5 Explain how to ensure the vision and future direction of the service remains compatible with internal aspirations of the service and the external **adult care system**
2. Be able to lead commitment and implementation of the vision and future direction of the service	2.1 Communicate own ideas and enthusiasm about the service and its future in a way that engages others
	2.2 Build support for the vision and future direction of the service and ensure it is shared and owned by those who will be implementing and communicating it
	2.3 Support stakeholders within and beyond the organisation to be aware of the vision and the impact it will have on them
	2.4 Create a plan to implement the vision and future direction of the service
	2.5 Review and monitor stages of the plan, adapting approaches where needed

Range
1. Understand how to develop a vision for the future of the service
1.4 Others: In this context, could include, but is not limited to: • carers, loved ones, family or friends of those accessing care and support services

Range

- colleagues and peers
- team members
- managers and supervisors
- professionals from other services
- visitors to the work setting
- members of the community
- volunteers

1.5 Adult care system:

The local and national systems that support and also integrate the provision of adult social care.

Delivery and assessment guidance

This unit must be assessed in line with Skills for Care and Development assessment principles guidance.

This is a knowledge and skill-based unit. Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment.

LO 2 is skill-based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in person.

It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should not be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process must be agreed with NCFE prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols.

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 (KPIs)
- management meetings
- networking activity
- organisational organigram
- organisational political, economic, social and technological, legal and environmental (PESTLE) analysis/strength, weakness, opportunity and threat (SWOT) analysis
- partnership activity

Delivery and assessment guidance
• positioning paper • quality improvement plans • risk management • self-assessment cycle • statement of purpose • strategic business plan • team meetings

LMAC 13 Continuous improvement in adult care (Y/652/0139)

Unit summary				
The aim of this unit is to consider the systems and processes used to monitor and develop the quality of service provision to improve outcomes for individuals.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Mandatory	**Achieved/not yet achieved**	**Level 5**	**3 credits**	**30 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand continuous quality improvement in adult social care	1.1 Describe how to use continuous quality improvement tools, techniques and approaches to meet regulatory and best practice **guidance and requirements**
	1.2 Describe the potential signs or indicators of poor practices
	1.3 Discuss how quality assurance practices inform quality improvement activities
	1.4 Analyse how governance, audit processes and compliance activity can support person-centred, outcome-based practices
2. Be able to lead continuous improvement in practice	2.1 Monitor and evaluate progress towards the achievement of positive outcomes and the implementation of person-centred practice
	2.2 Create opportunities for **individuals** and **others** to provide feedback on their experiences of the service
	2.3 Ensure that individuals' and others' comments and views about the service are valued and used to improve and develop practice
	2.4 Use evidence-based research to identify best practice in outcomes-based and person-centred practice
	2.5 Use **digital approaches and technology** to improve and enhance outcomes in person-centred practice
	2.6 Identify and act on lessons learned from incidents and events
	2.7 Review the extent to which systems, **processes** and practice facilitate positive outcomes for individuals
	2.8 Plan for and lead the implementation of improvements to systems, processes and practice

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
3. Understand how to implement effective change	3.1 Evaluate models and processes of best practice in change management
	3.2 Discuss how to use relevant change management tools and skills needed to inspire change and support innovation and service development
	3.3 Analyse the range of external drivers for change and how these impact on the service
	3.4 Describe the **success factors** and barriers to implementing effective change
4. Be able to lead a culture that supports innovation and change to improve outcomes for individuals	4.1 Evaluate the achievement of person-centred outcomes to identify where improvements could be made
	4.2 Engage with others to identify opportunities for service improvement through transformation and innovation
	4.3 Recognise and utilise the expertise of **others** when driving innovation, improvement and change

Range
1. Understand continuous quality improvement in adult social care
1.1 Guidance and requirements: Examples include, but are not limited to: • regulatory requirements for the governance of adult social care services, (for example, Health and Social Care Act 2008 (Regulated Activities) Regulations 2014) • Care Quality Commission (CQC) fundamental standards • National Institute for Health and Care Excellence (NICE) social care guidance and quality standards • quality frameworks • codes of practice
2. Be able to lead continuous improvement in practice

Range
2.2 Individuals: A person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for. **2.2 Others:** In this context, 'others' could include, but is not limited to: • carers, loved ones, family or friends of those accessing care and support services • colleagues and peers • team members • managers and supervisors • professionals from other services • visitors to the work setting • member of the community • volunteers **2.5 Digital approaches and technology:** These technologies help to ensure care is tailored, responsive and promotes choice, control and wellbeing for the individuals. Examples of digital technologies could include but are not limited to: • digital care plans • video calling for family involvement • medication management apps • voice activated technology • outcome tracking tools • accessible communication tools • technology to support independence **2.7 Processes:** Governance, audit processes and compliance activity.
3. Understand principles of effective change management
3.4 Success factors: How outcomes are measured because of change.
4. Be able to lead a culture that supports innovation and change to improve outcomes for individuals
4.3 others

Range
In this context, ‘others’ could include, but is not limited to: • carers, loved ones, family or friends of those accessing care and support services • colleagues and peers • team members • managers and supervisors • professionals from other services • visitors to the work setting • member of the community • volunteers

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. This is a knowledge and skill-based unit. Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment. LOs 2 and 4 are skill-based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in person. It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should not be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process must be agreed with NCFE prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording and storage protocols. Examples of evidence for the learner portfolio: • coaching and mentoring activity • induction • policy and procedural development • role modelling • supervision and appraisal • training materials • workforce development plan

Theme 5 Communication

LMAC 14 Effective communication in adult care (H/652/0141)

Unit summary				
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.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Mandatory	**Achieved/not yet achieved**	**Level 5**	**4 credits**	**40 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Know how to use communication skills to achieve positive interactions	1.1 Discuss **communication skills, methods and models** and the circumstances they may be most appropriately used in
	1.2 Explain how to achieve maximum impact by using a range of appropriate communication skills and methods in adult care settings
	1.3 Analyse how communication underpins: • achievement of positive **outcomes** for **individuals** and **others** • leadership and management of teams • sustainable **relationships and partnerships**
2. Know how to manage and resolve conflict	2.1 Describe models of conflict management and conflict resolution
	2.2 Explain factors that can cause friction and conflict within the workplace
	2.3 Describe skills that underpin conflict management and conflict resolution techniques
3. Be able to communicate effectively with others	3.1 Demonstrate a range of effective **communication styles, methods and skills**
	3.2 Apply communication skills appropriately in relation to message and **audience** for maximum impact
	3.3 Adapt communication style in response to the emotional context and communication style of others
	3.4 Identify and overcome barriers to communication with a range of people
4. Be able to develop communication systems and practices that promote positive outcomes	4.1 Monitor and evaluate the effectiveness of both internal and external **communication systems** and practices used in the workplace
	4.2 Monitor and evaluate the effectiveness of communication practices to support positive outcomes for individuals
	4.3 Propose improvements to communication systems and practices and lead the implementation of these improvements

Range
1. Know how to use communication skills to achieve positive interactions
1.1 Communication skills, methods and models: Must include a range of skills, methods and models including digital.

Range

In context this may include but is not limited to:

- **Skills:**
  - active listening
  - open questioning
  - empathy
- **Methods:**
  - verbal
  - non-verbal
  - written
  - digital
- **Models:**
  - Tuckman's stages of group development
  - transactional analysis
  - the Shannon-Weaver model

1.3 Outcomes:

An aim or objective that an individual would like to achieve or that needs to happen (for example, continuing to live at home, or being able to go out and about).

1.3 Individuals:

A person accessing care and support. The individual, or individuals will normally refer to the person or people that the learner is providing care and support for.

1.3 Others:

In this context, 'others' could include, but is not limited to**:**

- carers, loved ones, family or friends of those accessing care and support services
- team members
- colleagues and peers
- managers and supervisors
- professionals from other services
- visitors to the work setting
- members of the community
- volunteers

1.3 Relationships and partnerships:

Could include those involved in care service provisions (for example, networks, communities and other professionals and organisations).

3. Be able to communicate effectively with others

3.1 Communication styles, methods and skills:

Range
Could include, but are not limited to: • verbal: words, voice, tone, pitch, spoken and written • non-verbal: body language, proximity, eye contact, touch, gestures, behaviour • additional methods to support communication: signs, symbols and pictures, objects of reference • face-to-face communication (physically together or online), phone calls, email, letters, reports, text messages, the use of digital technology and technological aids, social networks, presentations • active listening skills including paraphrasing, reflection, summarising, reframing, providing encouragement • interpretation of non-verbal communication • ability to use silence to provide space and support **3.2 Audience:** In this context, the learner should demonstrate appropriate communication skills across and within a range of different audiences in the work setting. Examples could include, but are not limited to: • individuals accessing care and support services • carers, loved ones, family or friends of those accessing care and support services • team members • professionals from other services
4. Be able to develop communication systems and practices that promote positive outcomes
4.1 Communication systems: Learners must include manual and electronic systems.

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. This is a knowledge and skill-based unit. Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment. Learning Outcomes 3 and 4 are skill-based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in person. It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should not be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process must be agreed with NCFE prior to use. This

Delivery and assessment guidance
should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols. 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 and ethical requirements and lessons learned • risk assessments including use of technology • role modelling • safeguarding protocols • self-assessment • service level agreements • supervision and appraisal • team meetings • workforce development

LMAC 15 Handling information in adult care (K/652/0143)

Unit summary				
The aim of this unit is to provide learners with the knowledge, understanding and skills required for effective information management in adult care.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Mandatory	**Achieved/not yet achieved**	**Level 5**	**2 credits**	**10 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand effective information management	1.1 Discuss own role and responsibilities in: • **effective information management** • **supporting others** to effectively handle information
	1.2 Explain how to respond to a data breach, including reporting procedures
	1.3 Explain how to initiate a service's business continuity plan and relevance to data and cyber security
2. Be able to implement systems for effective information management	2.1 Lead the implementation of policies and systems for effective information management to meet **legal and ethical** requirements
	2.2 Lead practice to address legal and/or ethical conflicts that arise between maintaining confidentiality and sharing information
	2.3 Identify own team's training needs in relation to handling information and implement a plan to address these needs

Range

1. Understand effective information management

1.1 Effective information management:

Should include consideration of:

- privacy notices
- transparency information
- data and cyber security
- how devices are secured
- confidentiality, availability and integrity of records/information including digital records
- reducing the risk of data breaches

1.1 Supporting others:

In this context, supporting others to understand, apply and maintain high standards when handling data, particularly sensitive and confidential information.

Could include but is not limited to:

- modelling best practice

Range
• supporting and developing others • meeting requirements of the Data Security and Protection Toolkit (DSPT) • digital leadership • preventative approaches
2. Be able to implement systems for effective information management
2.1. Legal and ethical: Could include, but is not limited to: • General Data Protection Regulation (GDPR) • data security and protection • ethical and secure use and monitoring of Artificial Intelligence (AI) • subject access requests (SAR) • Care Quality Commission (CQC) Regulations • data control • sharing information • safeguarding

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. This is a knowledge and skill-based unit. Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment. Learning Outcome 2 is skill-based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in person. It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should not be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process must be agreed with NCFE prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols. 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

Delivery and assessment guidance
• 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 and ethical requirements and lessons learned • risk assessments including use of technology • role modelling • safeguarding protocols • self-assessment • service level agreements • supervision and appraisal • team meetings • workforce development

Theme 6 Values and behaviours

LMAC 16 Lead person-centred practice in adult care (R/652/0146)

Unit summary				
The aim of this unit is to provide learners with the knowledge, understanding and skills required to lead and manage outcomes-based and person-centred practice and promote the health and wellbeing of individuals in adult care.				
Assessment				
This unit is internally assessed via a portfolio of evidence				
Mandatory	**Achieved/not yet achieved**	**Level 5**	**7 credits**	**55 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand the principles and values of person-centred and outcomes-based practice	1.1 Describe the features, principles, drivers and values of: • **strength-based approaches** • **co-production** • **person-centred practice** • **active participation** • **outcomes-based practice**
	1.2 Consider the relationship between strength-based approaches, co-production and person-centred practice and their contribution to: • outcomes-based practices • the **individual's** health and **wellbeing**, independence, choice and control
2. Understand the value of person-centred practice in partnership working to enabling individuals to achieve their desired outcomes	2.1 Analyse the role of **partnerships, collaboration** and co-production with individuals and **others** in enabling individuals to achieve their desired outcomes
	2.2 Explain own service's role in enabling individuals to build and maintain **relationships** and connections to their **community**
	2.3 Describe how **integrated service provision** that crosses traditional boundaries achieves positive outcomes for individuals
3. Be able to lead practice to facilitate positive outcomes for individuals through person-centred practice	3.1 Develop and implement a plan to ensure team members have the training and development needed to support individuals in person-centred ways to achieve individuals' desired outcomes
	3.2 Support and develop team members to work in partnership with individuals and others to recognise and respond to individuals' evolving strengths, needs and preferences
	3.3 Support and develop others to apply person-centred approaches in complex situations to ensure positive outcomes for individuals and those important to them
	3.4 Facilitate the development and review of individuals' care and support ensuring individuals and others are actively involved and that plans and activities reflect individuals' preferences, wishes, strengths and needs

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
	3.5 Manage resources in ways that: • support individuals to make choices about their health and wellbeing and achieve positive outcomes • provide reasonable adjustments to enable individuals to access care and support
	3.6 Implement systems and processes for recording: • identification, progress towards and achievement of individuals' desired outcomes • the implementation of person-centred practice
4. Understand the role of relationships in promoting health and wellbeing	4.1 Analyse the importance of proactive approaches in supporting individuals to build and maintain relationships
	4.2 Appraise how open, proactive cultures that support individuals' rights to have the relationships they choose can reduce or minimise risks
	4.3 Analyse the range and types of support an individual may need to maintain and build relationships, and when external services may be required
5. Be able to lead practice in recognising individuals' relationships	5.1 Develop approaches that recognise individuals' sexuality and relationship needs
	5.2 Promote an open, proactive culture where individuals and others feel confident to discuss sexuality, relationships and protection
	5.3 Ensure individuals and others have access to **support, information and advice** about relationships and sexuality
6. Understand positive risk-taking in the context of supporting individuals	6.1 Explain how positive risk-taking can contribute to the achievement of positive outcomes for individuals
	6.2 Explain the impact of a risk-averse culture on person-centred practice and the wellbeing of individuals
	6.3 Explain the **considerations** that need to be applied in the management of positive risk-taking
	6.4 Explain how supporting others to balance risks and rights promotes person-centred practices
7. Be able to lead the implementation of practices, policies and procedures to manage risk and positive risk-taking	7.1 Lead a culture that recognises the benefits of positive risk-taking in person-centred practice and the wellbeing of individuals
	7.2 Facilitate a person-centred approach in the management of risks
	7.3 Evaluate own and others' practice in leading a balanced approach to risk-taking

Range
1. Understand the principles and values of person-centred and outcomes-based practice
1.1 Strength-based approaches: Also referred to as asset-based approaches. This approach focuses on individuals' strengths, resources and what they are able to do themselves to keep well and maintain independence.

Range
1.1 Co-production: An equal relationship between individuals accessing a service and the people responsible for the service. They work together to decide the best way to design and deliver services and implement those decisions together. Co-production recognises that people who use social care services, (and their families), have knowledge and experiences that can be used to help make services better, not only for themselves but for other people who access social care. **1.1 Person-centred practice:** An approach that sees the individual accessing social care services as an equal partner in their care and support who is at the centre of all decisions relevant to them. **1.1 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. **1.1 Outcomes-based practice:** An 'outcome' refers to individuals' aims or objectives – the things individuals want to achieve or need to happen. Outcomes-based practice focuses on supporting individuals to achieve the outcomes most important to them and offers innovative approaches to enable this. **1.2 Individual:** A person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for. **1.2 Wellbeing:** Wellbeing is a broad concept relating to the following areas in particular: • personal dignity • physical and mental health • emotional wellbeing • 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 wellbeing • domestic, family and personal relationships

Range
2. Understand the value of person-centred practice in partnership working to enabling individuals to achieve their desired outcomes

2.1 Partnerships:

Working with the individual, networks, communities, and other professionals and organisations.

2.1 Collaboration:

Working with other partners, understanding and prioritising their needs and establishing mutually beneficial and respectful relationships, whilst remaining focused on own desired outcomes, needs and agenda.

2.1 Others:

In this context, 'others' refers to everyone a worker is likely to come into contact with, including, but is not limited to:

- carers, loved ones, family or friends of those accessing care and support services
- colleagues and peers
- team members
- managers and supervisors
- professionals from other services
- visitors to the work setting
- members of the community
- volunteers

2.2 Relationships:

Learners should consider the range of relationships important to individuals they are supporting. Consideration should go beyond immediate family and next of kin, and may include partners/spouses, extended family, friends, pets, neighbours, people in the community and other professionals. Learners should consider intimacy, sexuality and sexual relationships.

2.2 Community:

Could include, but is not limited to how the individual is supported to engage with and access their local community, such as:

- social and recreational activities
- transport
- leisure services
- spiritual and cultural services and support
- hobbies
- education
- housing provision
- voluntary activities

Range
For some individuals, their community will be very close to home; for others, it will be much wider. **2.3 Integrated service provision:** Joined-up, co-ordinated care and support that is planned and organised around the individual's needs, preferences and aspirations. If focuses on early intervention and preventative care. Bringing together health, social care, housing, education and other community services.
5. Be able to lead practice in recognising individuals' relationships
5.3 Support, information and advice: Could include, but is not limited to: • clinical services • counselling and psychosexual services • family support workers • mental health services • interpreting services • advocacy services • sexual assault and referral centres (SARCs)
6. Understand positive risk-taking in the context of supporting individuals
6.3 Considerations: Could include, but not limited to: • mental capacity • safeguarding • individuals' rights • duty of care

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. This is a knowledge and skill-based unit. Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment. Learning Outcomes 3, 5 and 7 are skill-based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in person. It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should not be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process must be agreed with NCFE prior to use. This

Delivery and assessment guidance
should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols. 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 (for example, advocacy) • training materials and resources • workforce development plan • values statement

LMAC 17 Health and wellbeing in adult care (Y/652/0148)

Unit summary				
The aim of this unit is to provide learners with the knowledge, understanding and skills required to promote the health and wellbeing of individuals in adult care.				
Assessment				
This unit is internally assessed via a portfolio of evidence				
Mandatory	**Achieved/not yet achieved**	**Level 5**	**4 credits**	**35 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Be able to lead a culture that promotes individuals' wellbeing and independence in all aspects of day-to-day practice	1.1 Facilitate a culture: • where **individuals'** history, preferences, wishes, needs and strengths prioritised, recognised, respected and responded to • that enables individuals to lead full and meaningful lives connected to **those important to them** and their **communities** • that enables individuals and those important to them to influence and co-design how care and services are provided
2. Understand the importance of promoting prevention and individuals' health and wellbeing	2.1 Explain the range of **factors** that may influence an individual's health and wellbeing
	2.2 Summarise own role, and role of **others**, in supporting **prevention, monitoring, assessing** and **promoting** individuals' wellbeing
	2.3 Explain own role in providing sufficient training, support and supervision to enable others to monitor the individual's health and wellbeing
	2.4 Explain how to ensure lines of accountability and responsibility are understood for delegated healthcare tasks
3. Be able to lead practice in promoting **prevention** and protecting individuals' health and wellbeing	3.1 Support others to: • meet identified health and wellbeing needs • monitor and assess changes to individuals' health and wellbeing using **appropriate tools** • understand the concept of living and ageing well • access preventative healthcare advice, care and screening • understand the importance acting on early identification of deterioration in individuals' health and wellbeing • record and respond to assessments and observations of individuals' health and wellbeing
	3.2 Implement protocols for involving others in response to changes in individuals' health and wellbeing
	3.3 Work in **partnership** with individuals, healthcare professionals and others to agree roles and responsibilities in achieving individuals' **healthcare and wellbeing** outcomes

Range
1. Lead a culture that promotes individuals' wellbeing and independence in all aspects of day-to-day practice

Range
1.1 Individual: A person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for. **1.1 Those important to them:** Could include, but is not limited to, those the individual chooses to be involved in their life (for example, families, carers and advocates). **1.1 Communities:** Could include, but is not limited to how the individual is supported to engage with and access their local community, such as: • social and recreational activities • transport • leisure services • spiritual and cultural services and support • hobbies • education • housing provision • voluntary activities For some individuals, their community will be very close to home; for others, it will be much wider.
2. Understand the importance of promoting individuals' health and wellbeing

Range
2.1 Factors: Factors affecting health and wellbeing will be different for different people and the local population, health and care needs should also be considered. Learners should show consideration for environmental, physical, social and psychological factors. **2.2 Others:** In this context, 'others' refers to everyone a worker is likely to come into contact with, including, but is not limited to: • carers, loved ones, family or friends of those accessing care and support services • colleagues and peers • team members • managers and supervisors • professionals from other services • visitors to the work setting • members of the community • volunteers **2.2. Prevention:** In this context it involves leading a proactive, preventative approach to health and care **2.2 Monitoring:** Could include, but is not limited to: • staff training to recognise the early signs of change • oversee appropriate monitoring tools • up to date assessments • referrals to health care professionals • maintain a culture of person-centred care • proactive support • access to social prescribing **2.2 Assessing:** Involves using structured tools to evaluate an individual's current health and risks. Assessment must also include the individual's own views and preferences, involving families or advocates where appropriate. **2.2 Promoting:** Involves being a key role in shaping a culture where wellbeing is actively supported through appropriate activities, healthy routines, emotional support, good nutrition and safe environments.

Range
3. Be able to lead practice in promoting prevention and protecting individuals' health and wellbeing

3. Prevention:

In this context it involves leading a proactive, preventative approach to health and care.

3.1 Appropriate tools:

This involves using a range of tools that support evidence-based, decision making and early intervention.

This could include but is not limited to:

- Waterlow score
- Malnutrition Universal Screening Tool (MUST)
- mood and wellbeing charts
- behaviour monitoring tools
- AI-driven monitoring systems
- lifestyle monitoring technologies
- early indicator monitoring tools
- SBARD (situation, background, assessment, recommendation, decision)
- RESTORE2
- digital social care records (DSCRs)
- quality and outcomes frameworks
- multidisciplinary meeting notes and communication logs

3.3 Partnership:

Could include but is not limited to national and local support and initiatives (for example, integrated care systems and neighbourhood health agendas and services).

3.3 Healthcare and wellbeing:

Could include, but is not limited to:

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

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. This is a knowledge and skill-based unit. Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment.

Delivery and assessment guidance

Learning Outcomes 1 and 3 are skill-based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in person.

It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should not be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process must be agreed with NCFE prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols.

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 (for example, advocacy)
- training materials and resources
- workforce development plan
- values statement

LMAC 18 Equality, diversity, inclusion and human rights in adult care (K/652/0152)

Unit summary				
The aim of this unit is to provide learners with the knowledge, understanding and skills required to champion equality, diversity, inclusion and human rights in adult care.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Mandatory	**Achieved/not yet achieved**	**Level 5**	**2 credits**	**20 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand how the legal, societal and historical context of equality, diversity, inclusion and human rights relates to own role	1.1 Describe the legislation underpinning equality, diversity, inclusion and human rights
	1.2 Describe the societal and historical influences underpinning equality, diversity, inclusion and human rights
	1.3 Describe the impact of legal, societal and historical influencers on own role in promoting a culture that values equality, diversity, inclusion and human rights
	1.4 Describe the impact of discrimination or **closed cultures**, inclusion and human rights on **individuals** and **others**
	1.5 Explain how own and others' values, beliefs and experiences can impact practices and behaviours relating to equality, diversity, inclusion and human rights
2. Be able to demonstrate inclusive leadership and lead a **culture** that promotes, values and celebrates equality, diversity, inclusion and human rights	2.1 Evaluate own and others' ability to positively respond to people's differences to meet a wide range of **individual needs** to achieve better outcomes
	2.2 Evaluate how own service supports equity and **promotes,** values and celebrates equality, diversity, inclusion and human rights
	2.3 Implement changes to practices, policy or procedures to improve how the service promotes, values and celebrates equality, diversity, inclusion and human rights
	2.4 Monitor and review changes and improvements to lead to better outcomes for individuals and others
	2.5 Challenge, and support others to challenge, discrimination, harassment and exclusion in ways that are likely to achieve change and promote positive outcomes

Range
1. Understand how the legal, societal and historical context of equality, diversity, inclusion and human rights relates to own role
1.4 Closed cultures: A closed culture is a poor culture in a health or care service that increases the risk of harm. This includes abuse and human rights breaches. The development of closed cultures can be deliberate or unintentional – either way it can cause unacceptable harm to a person and their loved ones. Learners should consider

Range
how such cultures may overlook the full range of communication, cognitive, or sensory needs associated with neurodiversity and how such cultures may not always reflect the full diversity of communication, cognitive, or sensory profiles. **1.4 Individuals:** A person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for. **1.4 Others:** In this context, 'others' could include, but is not limited to: • carers, loved ones, family or friends of those accessing care and support services • team members • colleagues and peers • managers and supervisors • professionals from other services • visitors to the work setting • members of the community • volunteers
2. Be able to demonstrate inclusive leadership and lead a culture that promotes, values and celebrates equality, diversity, inclusion and human rights
2. Culture: When considering the culture, learners should consider how they lead this for individuals accessing services and for the workforce. **2.1 Individual needs:** In this context, individual needs may include, but not inclusive of: • physical • emotional • cognitive • cultural **2.2 Promotes:** Can include but is not limited to how the workforce facilitates, advocates and challenges.

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance.

Delivery and assessment guidance
This is a knowledge and skill-based unit. Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment. Learning Outcomes 2 is skill-based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in person. It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should not be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process must be agreed with NCFE prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols. Examples of evidence for the learner portfolio: • coaching and mentoring activity • induction • policy and procedural development • role modelling • supervision and appraisal • training materials • workforce development plan

Theme 7 Health and safety

LMAC 19 Health and safety (L/652/0153)

Unit summary				
The aim of this unit is to provide learners with knowledge, understanding and skills in relation to health and safety and infection prevention and control in adult care.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Mandatory	**Achieved/not yet achieved**	**Level 5**	**4 credits**	**40 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand health and safety requirements in adult social care	1.1 Summarise the **legislative framework** for health and safety in adult care settings
	1.2 Describe **key sources of information and guidance** for health and safety in the workplace
2. Understand own role, responsibilities and accountability in relation to infection prevention and control in adult care	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
	2.3 Analyse how policies and procedures in own setting meet regulatory requirements and current guidance for infection prevention and control
	2.4 Explain how to ensure a **proportionate approach** to the implementation of infection prevention and control measures in own setting
3. Be able to lead the implementation of health and safety requirements in adult social care	3.1 Interpret and apply **legislation and guidance** to organisational health and safety policies and working practices
	3.2 Support **others** to comply with relevant legislative and organisational health and safety practices, policies, and procedures-to help keep them safe
	3.3 Monitor compliance with safe working and practices, and provide appropriate intervention where procedures are not adhered to
	3.4 Evaluate working practices and make improvements to health and safety practices, policies, and procedures
	3.5 Complete records and reports on health and safety and issues according to legislative and organisational requirements

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
4. Understand effective risk management	4.1 Examine the range of risk management requirements in adult care
	4.2 Explore own responsibilities to identify, assess and manage risk
	4.3 Examine the range of mechanisms and tools available to inform and carry out risk management activities
5. Be able to lead the implementation of policies, procedures and practices to effectively manage risk and positive risk-taking	5.1 Lead a culture that recognises the benefits of positive risk-taking in person-centred practice and the wellbeing of individuals
	5.2 Contribute to the development of policies, procedures and practices to identify, assess and manage risk
	5.3 Facilitate a person-centred approach in the management of risks
	5.4 Work with **others** to assess and manage risks and issues
	5.5 Support team members to understand risk management and adhere to guidance that promotes safe practices
	5.6 Evaluate own and others' practice in leading a balanced approach to risk-taking
6. Be able to lead the prevention and control of infection in adult care settings	6.1 Implement risk assessment and control measures to minimise infection
	6.2 Monitor **factors and practices** that may contribute to the spread and/or reduction of infection
	6.3 Monitor trends and patterns of infection in own setting
	6.4 Record and report potential infection risks and outbreaks according to organisational and regulatory requirements
	6.5 Facilitate induction and ongoing training for all staff relevant to their role in infection prevention and control
	6.6 Work with others to evaluate policies and procedures for infection prevention and control within the setting

Range
1. Understand health and safety requirements in adult social care
1.1 Legislative framework: Must include the range of health and safety legislation and specific regulations applicable to the environment and care service being provided. **1.2 Key sources of information and guidance:** Must include, but is not limited to: • the role of government agencies and advisory bodies (for example, the Health and Safety Executive (HSE), UK Health Security Agency (UKHSA)) • may also include other internal and external support mechanisms

2. Understand own role, responsibilities and accountability in relation to infection prevention and control in adult care
2.4 Proportionate approach: Could include, but is not limited to: • type of setting • level and threat of infection risk • individual health and wellbeing • national and local guidance • wider community • Health and Social Care Act 2008 Code of Practice on the prevention and control of infections and related guidance appendix
3. Be able to lead the implementation of health and safety requirements in adult social care
3.1 Legislation and guidance: Could include, but is not limited to: • local guidance • changing and updated guidance and specific information available to support legislation and regulations (for example, the Code of Practice on the prevention and control of infections and related guidance) **3.2 Others:** In this context, 'others' could include, but are not limited to: • carers, loved ones, family or friends of those accessing care and support services • team members • professionals from other services • visitors to the work setting • volunteers
5. Be able to lead the implementation of policies, procedures and practices to effectively manage risk and positive risk-taking
5.4 In this context, '**others**' could include, but are not limited to: • carers, loved ones, family or friends of those accessing care and support services • team members • professionals from other services • visitors to the work setting • volunteers
6. Be able to lead the prevention and control of infection in adult care settings

6.2 Factors and practices:

Should be within the context of the learner's own setting and could include, but are not limited to:

- group living
- personal care
- clinical and healthcare activities
- food safety and hygiene
- individual health needs
- waste disposal
- hand hygiene routines and facilities
- cleaning schedules
- supply, accessibility and use of personal protective equipment
- staff sickness and reporting
- ventilation

Delivery and assessment guidance

This unit must be assessed in line with Skills for Care and Development assessment principles guidance.

This is a knowledge and skill-based unit. Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment.

Learning Outcomes 3, 5 and 6 are skill-based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in person.

It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should not be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process must be agreed with NCFE prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols.

Examples of evidence for the learner portfolio:

- analysis of data (for example, 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 (for example, accidents, incidents, medication-related incidents or errors, review and audit)
- strategic planning
- supervision and appraisal
- team meetings

Delivery and assessment guidance
• training records • workforce development plan

Theme 8 Professional development

LMAC 20 Continuous development in adult care (A/652/0149)

Unit summary				
The aim of this unit is to provide learners with the knowledge, understanding and skills required to manage own workload and professional behaviour when working in adult care. Learners are required to develop self-awareness and a commitment to continuous development.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Mandatory	**Achieved/not yet achieved**	**Level 5**	**5 credits**	**35 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Be able to demonstrate commitment to undertake and maintain own professional development	1.1 Evaluate own knowledge and performance against **standards** and **benchmarks**
	1.2 Produce and implement a personal development plan that: • identifies own professional development needs and aspirations • prioritises own professional development needs and aspirations with clear objectives • identifies a **range of opportunities** to support own professional development and reflects own learning style and needs
	1.3 Create and engage with opportunities for **others** to provide feedback on own performance across all aspects of role
	1.4 Evaluate how own practice has been improved through: • implementation of the professional development plan • reflection on feedback from others • learning from achievements, successes and **adverse events**
2. Be able to demonstrate commitment to and apply self-awareness in own performance and practice	2.1 Use feedback and reflective practice to increase own self-awareness
	2.2 Analyse how own values, belief systems and experiences affect own practices
	2.3 Analyse how own emotions affect behaviour and the impact this has on others
3. Be able to manage own workload and responsibilities effectively	3.1 Use strategies and tools to identify priorities for work
	3.2 Plan ways to meet responsibilities and respond to organisation priorities while maintaining own wellbeing
	3.3 Use digital technology to enhance own and others' efficiency
	3.4 Facilitate the development of others to enable effective delegation
	3.5 Delegate responsibilities to others whilst taking into account their competence, experience and current workload
	3.6 Revise plans when priorities change
	3.7 Plan strategies and support mechanisms to access when workload is difficult to manage

Range
1. Be able to demonstrate commitment to and undertake and maintain own professional development

1.1 Standards:

Could include, but are not limited to:

- codes of practice
- regulations
- minimum standards
- national occupational standards (NOS)
- National Institute for Health and Care Excellence (NICE) guidance
- quality standards

1.1 Benchmarks:

Could include, but are not limited to:

- regulatory standards
- organisation benchmarks
- sector and specialist specific frameworks
- own development plan

1.2 Range of opportunities:

Could include, but is not limited to:

- formal or informal support
- supervision, appraisal, mentoring, peer support
- opportunities within and outside the organisation
- different types of learning and ways to achieve
- self-led and directed learning opportunities

1.3 Others:

In this context, ‘others’ could include, but is not limited to:

- carers, loved ones, family or friends of those accessing care and support services
- colleagues and peers
- team members
- managers and supervisors
- professionals from other services
- volunteers

1.4 Adverse events:

An incident or disruption with associated risks that could lead to unexpected, unintended and preventable harm to others.

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. Learning Outcomes 1, 2 and 3 are primarily skill-based, and primary evidence throughout the qualification should include observation of direct practice in the workplace in person. It is acknowledged that remote observations could be used in appropriate circumstances, as an approach to enrich, enhance and triangulate main direct observations which have been carried out. Remote observations should not be planned and used as the primary approach. Safe and reliable approaches to use of remote technologies in the assessment process must be agreed with NCFE prior to use. This should include how the privacy, dignity and confidentiality of any individual will be protected and robust evidence recording protocols. 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 (KPIs) • 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 • strength, weakness, opportunity and threat (SWOT) analysis • technology use • workforce development plan

LMAC 21 Personal wellbeing in adult care (T/652/0147)

Unit summary				
The aim of this unit is to provide learners with the knowledge and understanding required to recognise when stress or other factors affect their wellbeing and explore strategies they can implement to support own health and wellbeing.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Mandatory	**Achieved/not yet achieved**	**Level 5**	**3 credits**	**30 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand own wellbeing	1.1 Explain what is meant by 'personal wellbeing', 'self-care' and 'resilience'
	1.2 Describe **factors** that positively and negatively influence own wellbeing
	1.3 Describe **indicators** of **own wellbeing** and wellbeing deterioration
2. Understand the importance of maintaining and improving own wellbeing	2.1 Examine the impact of own wellbeing on: • own role and behaviour • **others**
3. Understand how to prevent, maintain and improve own wellbeing	3.1 Evaluate prevention and monitoring **strategies** which can be used to support positive outcomes in own wellbeing
	3.2 Review a range of wellbeing **support offers** available and how to access them
	3.3 Explain how to access professional help if needed.
4. Understand how to manage own stress and anxiety	4.1 Explain what is meant by **stress** and anxiety
	4.2 Describe factors that can trigger own stress and anxiety in self
	4.3 Describe indicators of stress and anxiety in self
	4.4 Review how stress and anxiety may affect own reactions and behaviour towards others
	4.5 Discuss strategies that could be used to help manage own stress and anxiety
	4.6 Explain how to access a range of support offers

Range
1. Understand own wellbeing
1.2 Factors: These should be specific to the learner. The learner should show consideration of environmental, physical, social and psychological factors inside and outside the workplace. **1.3 Indicators:** These should be specific to the learner.

Range
1.3 Own wellbeing: In this context, wellbeing refers to that of the learner. Wellbeing is a broad concept referring to a person's quality of life, considering health, happiness and comfort. It may include aspects of social, emotional, cultural, spiritual, intellectual, economic, physical and mental wellbeing.
2. Understand the importance of maintaining and improving own wellbeing
2.1 Others: Could include, but are not limited to: • team members • other colleagues • individuals accessing care and support services • families, carers and other professionals Learners may also wish to consider their personal relationships.
3. Know how to prevent, maintain and improve own wellbeing

3.1 Strategies:
 	
Learners should develop personal strategies that support their own wellbeing and help prevent issues before they arise. In addition, learners should have strategies for recognising early indicators of deterioration. A proactive preventative approach is key to sustaining wellbeing in demanding job roles.
 	
3.2 Support offers:
 	
The range should include physical and mental wellbeing offers available inside and outside the learners' workplace. Learners should consider offers they use as well as those they currently choose not to. For example:
 	
• internal:
  ○ supervision
  ○ employee assistance scheme
  ○ mentor or buddying systems
• external:
  ○ self-help tools
  ○ apps and websites
  ○ local groups and networks

4. Understand how to manage own stress and anxiety
4.1 Stress: Is a natural response to pressure or challenging situations and can have positive as well as negative effects on a person. In this context, we refer to the negative impacts of stress.

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. This is a knowledge-based unit. Knowledge evidence may be generated outside of the work environment, but the final assessment and decision must show application of knowledge within the real work environment. 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 (KPIs) • 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 • strength, weakness, opportunity and threat (SWOT) analysis • technology use • workforce development plan

Optional units

Theme 9 Aspects of support

LMAC 22 Advocacy in adult care (J/652/0142)

Unit summary				
The aim of this unit is to provide learners with knowledge and understanding in relation to advocacy in adult care.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Optional	**Achieved/not yet achieved**	**Level 5**	**3 credits**	**25 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand the purpose of advocacy in relation to adult care	1.1 Summarise principles of advocacy
	1.2 Discuss types of advocacy
	1.3 Justify the importance of advocacy for **individuals** in adult care
2. Understand how advocacy is used within legal frameworks	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 (2025)
	2.3 Explain roles, responsibilities and accountabilities of advocates and referrers in compliance with the Care Act (2014)
3. Understand partnership working in advocacy	3.1 Evaluate multi-agency and **partnership working** in advocacy
	3.2 Evaluate the benefits of partnership working for individuals

Range
1. Understand the purpose of advocacy in relation to adult care
1.3 Individuals: A person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for.
3. Understand partnership working in advocacy
3.1 Partnership working: Working effectively together with professionals, agencies and organisations to enhance wellbeing and support positive and improved outcomes.

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. Examples of evidence for the learner portfolio:

Delivery and assessment guidance
• 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

LMAC 23 Assistive technology in adult care (T/652/0138)

Unit summary				
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.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Optional	**Achieved/not yet achieved**	**Level 5**	**3 credits**	**25 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand the use of assistive technology in adult social care	1.1 Discuss the **range and availability of assistive technology** used in adult care
	1.2 Explain how the use of assistive and digital technology supports positive **outcomes** for **individuals**
	1.3 Analyse potential conflicts with the use of assistive technology in adult care
	1.4 Explain how a range of assistive technology solutions can be adapted according to need and context
	1.5 Describe a range of assessment and referral processes used to secure assistive technology for individuals
	1.6 Evaluate the increasing use of digital technology in **managing effective service delivery** in adult care
2. Be able to facilitate the use of assistive technology	2.1 Explore assistive technology solutions to meet identified needs
	2.2 Assess the risks associated with the range of assistive technology solutions
	2.3 Support the individual to secure the provision of appropriate assistive technology
	2.4 Provide information and guidance to individuals and **others** about the use of assistive technology
	2.5 Support the individual and others to use assistive technology
3. Be able to lead and manage practice in relation to the use of assistive technology	3.1 Lead the implementation of systems to support the use of assistive technology
	3.2 Review practice in supporting the use of assistive technology
	3.3 Agree and implement recommendations to develop and improve practice in supporting the use of assistive technology

Range
1. Understand the use of assistive technology in adult social care
1.1 Range and availability of assistive technology: Could include, but is not limited to: • sensors, alarms and detectors • telecare and telehealth

Range
• communication aids • mobility aids and adaptations • posture management • pressure management • moving and handling equipment • therapy equipment **1.2 Outcomes:** An aim or objective that an individual would like to achieve or that needs to happen (for example, continuing to live at home, or being able to go out and about). **1.2 Individuals:** The person using the care or support service. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for. **1.6 Managing effective service delivery:** Could include, but is not limited to: • telecare • remote monitoring • remote consultations • digital health self-reporting
2. Be able to facilitate the use of assistive technology
2.4 Others: In this context, ‘others’ could include, but is not limited to: • carers, loved ones, family or friends of those accessing care and support services • colleagues and peers • team members • managers and supervisors • professionals from other services • visitors to the work setting • members of the community • volunteers

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. Examples of evidence for the learner portfolio:

Delivery and assessment guidance
• 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

LMAC 24 Digital skills in adult care (K/652/0134)

Unit summary				
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 digital technology.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Optional	**Achieved/not yet achieved**	**Level 5**	**3 credits**	**25 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand how to support individuals and team members to develop necessary digital skills	1.1 Analyse the **current drivers** for the use of digital technology in supporting effective service delivery in adult care
	1.2 Explain the importance of digital inclusion for: • **individuals** and **others** • the adult care workforce
	1.3 Describe a **range of opportunities** that would promote engagement with, and development of, **digital skills**
	1.4 Analyse potential barriers to engagement with, and understanding of, digital technology
	1.5 Explain how relevant legislation, regulation and guidance applies to use of digital technology within adult care
2. Be able to facilitate the development of digital skills	2.1 Assess gaps in digital skills within own team: • supporting individuals and others in the use of digital technology • acquisition of digital skills for personal and professional development
	2.2 Provide information and guidance to individuals and others about the use of digital technology
	2.3 Facilitate access to a range of opportunities appropriate to context and need
	2.4 Evaluate the impact of the development of digital skills on own service
3. Be able to lead and manage practice in relation to the use of digital technology	3.1 Lead the implementation of systems to support the use of digital technology
	3.2 Evaluate and review practice in supporting the use of digital technology
	3.3 Agree and implement recommendations to develop and improve practice in supporting the use of digital technology

Range
1. Understand how to support individuals and team members to develop necessary digital skills
1.1 Current drivers: Examples could include, but are not limited to: • digitalisation within the sector – technology-enabled care, digital care applications and mainstream technology

Range
• increasing use of health technology and assistive technology • digital needs of individuals using the service • recruitment and retention of the workforce • supporting accessibility and digital literacy • efficiency and cost-effectiveness • processing and management of information securely and supporting joined-up care • move to remote consultations and interactions **1.2 Individuals:** The person using the care or support service. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for. **1.2 Others:** In this context, 'others' could include, but is not limited to: • carers, loved ones, family or friends of those accessing care and support services • advocates • team members • colleagues and peers • managers supervisors • professionals from other services **1.3 Range of opportunities:** This must include examples of formal and informal training, and development provided within the organisation and sourced externally. **1.3 Digital skills:** May be relevant to the individual or those acting on behalf of the individual. They may also relate to systems and processes that team members are required to use. Examples include: • information management • online security • e-learning and online learning platforms • accessing online services and helplines • researching accurate health and/or legal information • use of apps to make appointments and order medication (for example, the NHS App) • communication and interactions • digital literacy • service delivery through digital technology (for example, remote consultations, telecare) • remote monitoring

Range
• safeguarding digital identity and online footprint • using electronic/online administration systems • transferring/sharing of personal data

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. 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

LMAC 25 Group living in adult care (F/652/0131)

Unit summary				
The aim of this unit is to provide learners with the knowledge, understanding and skills required to lead practice to support group living in adult care.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Optional	**Achieved/not yet achieved**	**Level 5**	**3 credits**	**25 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand theoretical approaches, legislation and regulatory requirements in relation to group living in adult care	1.1 Analyse 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. Understand how to promote positive outcomes in a group living environment	2.1 Describe how group living can promote positive **outcomes** for **individuals**
	2.2 Explain the contribution of ethos and culture in a group living environment to the **wellbeing** of individuals
	2.3 Describe inclusive approaches to decision-making in group living
	2.4 Describe ways individuals can be supported to develop and maintain relationships within and beyond the group living environment
	2.5 Explain safeguards in relation to group living in adult care
	2.6 Evaluate approaches to resolving conflicts and tensions in group living
	2.7 Explain effective resource management to maintain a positive group living environment in adult care
3. Be able to lead practice to support group living	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 **others** 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

Range
2. Understand how to promote positive outcomes in a group living environment
2.1 Outcomes: An aim or objective that an individual would like to achieve or that needs to happen (for example, continuing to live at home, or being able to go out and about).

Range
2.1 Individuals: A person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for. **2.2 Wellbeing:** Wellbeing is a broad concept relating to the following areas in particular: • personal dignity • physical and mental health • emotional wellbeing • 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 wellbeing • domestic, family and personal relationships
3. Be able to lead practice to support group living.
3.3 Others: In this context, 'others' refers to those people who may need to be involved in a response, including, but not limited to: • carers, loved ones, family or friends of those accessing care and support services • team members • managers and supervisors • professionals from other services

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. Examples of evidence for the learner portfolio: • 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

Delivery and assessment guidance
• 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

LMAC 26 Healthcare and clinical skills in adult care (K/652/0125)

Unit summary				
The aim of this unit is to provide learners with the knowledge, understanding and skills required to support the healthcare needs of individuals accessing the service. Learners will undertake clinical activities and lead practice to develop clinical skills in adult care.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Optional	**Achieved/not yet achieved**	**Level 5**	**4 credits**	**35 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand roles and responsibilities relating to clinical skills in adult care	1.1 Discuss the roles and responsibilities of healthcare practitioners involved in meeting the healthcare needs of **individuals**
	1.2 Analyse **professional responsibilities and accountabilities** in relation to clinical skills
2. Understand the healthcare needs of individuals using adult care services	2.1 Describe the range of **healthcare needs** of individuals using adult care services
	2.2 Explain the **clinical activities and interventions** used to support the health of individuals
	2.3 Analyse how clinical activities and interventions contribute to the health and **wellbeing** of individuals
3. Be able to assess, monitor and review the healthcare needs of individuals	3.1 Assess, monitor and review the health of individuals using combined methods
	3.2 Undertake specific risk assessments for different aspects of health and wellbeing
	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
4. Be able to undertake clinical activities to support healthcare needs of individuals	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

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
5. Be able to lead practice in the development of clinical skills	5.1 Evaluate the development needs of team members in relation to clinical skills
	5.2 Work with healthcare practitioners to: • agree protocols for safe and effective care • ensure team members have appropriate training
	5.3 Ensure lines of accountability for undertaking healthcare procedures are understood and agreed
	5.4 Review, update and develop practice according to professional and evidence-based practice standards

Range

1. Understand roles and responsibilities relating to clinical skills in adult care

1.1 Individuals:

A person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for.

1.2 Professional responsibilities and accountabilities

Could include, but are not limited to:

- principles of accountability
- working to agreed protocols
- integrated working with healthcare practitioners
- duty of care
- duty of candour
- consent
- boundaries and limits of own and others' role, responsibilities and competence
- safe and effective care
- infection prevention and control
- evidence-based practice
- codes of practice

2. Understand the healthcare needs of individuals using adult care services

2.1 Healthcare needs:

Could include, but are not limited to:

- management of common health conditions (for example, cardiovascular disease, diabetes, osteoarthritis, chronic obstructive pulmonary disease (COPD), epilepsy, stroke and dementia)
- acute illness and emergency response
- support at the end of life
- physical disabilities
- current and emerging healthcare needs

Range
2.2 Clinical activities and interventions: Could include, but are not limited to: • assessment and monitoring of health • physiological measurements • capillary blood samples • venipuncture 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 (for example, assisting with physiotherapy) • first response, emergency procedures, CPR and basic life support **2.3 Wellbeing:** Wellbeing is a broad concept relating to the following areas in particular: • personal dignity • physical and mental health • emotional wellbeing • 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 wellbeing • domestic, family and personal relationships

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. Examples of evidence for the learner portfolio: • care planning cycle • clinical records • continuous professional development (CPD) • healthcare protocols • partnership activity

Delivery and assessment guidance
• policy and procedural development • risk management • supervision and appraisal • workforce development

LMAC 27 Understanding mental capacity in adult care (H/652/0123)

Unit summary				
The aim of this unit is to provide learners with knowledge and understanding in relation to mental capacity in adult care.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Optional	**Achieved/not yet achieved**	**Level 5**	**3 credits**	**25 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand the provisions of the Mental Capacity Act in relation to adult care	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. Understand how to work with decision-makers	2.1 Explain the **roles and responsibilities** of an independent mental capacity advocate (IMCA) in the context of own role
	2.2 Describe the **key decision makers**
	2.3 Explain key considerations that need to be made when working with decision-makers
3. Understand how to work with individuals who lack capacity	3.1 Reflect on processes applied in own service when working with **individuals** who lack capacity
	3.2 Evaluate how own service ensures safety and **wellbeing** of individuals who lack capacity

Range
1. Understand the provisions of the Mental Capacity Act in relation to adult care
1.2 Principles of deprivation of liberty: Could include, but are not limited to: • presumption of capacity • best-interests • proportionality • least restrictive alternative • independent representation • the ‘acid test’ for deprivation

2. Understand how to work with decision-makers
2.1 Roles and responsibilities: Could include, but are not limited to: • advocacy service standards and codes of practice • limits and boundaries of independent advocacy • rights and powers of an IMCA • instructed and non-instructed advocacy • referral process **2.2 Key decision makers:** Could include, but are not limited to: • lasting power of attorney (LPA) • court of protection deputy • best-interest decision-maker
3. Understand how to work with individuals who lack capacity
3.1 Individuals: A person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for. **3.2 Wellbeing:** Wellbeing is a broad concept relating to the following areas in particular: • personal dignity • physical and mental health • emotional wellbeing • 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 wellbeing • domestic, family and personal relationships

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. Examples of evidence for the learner portfolio: • best-interest decisions • care planning cycle

Delivery and assessment guidance
• 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

LMAC 28 Specialist areas of care (A/652/0120)

Unit summary				
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 impact of a condition on the holistic needs and wellbeing of individuals within own service (for example, dementia, physical disability, sensory loss, acquired brain injury, learning disability, autistic spectrum condition, substance misuse, profound and complex needs, multiple conditions, mental health or terminal illness). 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.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Optional	**Achieved/not yet achieved**	**Level 5**	**5 credits**	**40 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand the impact of conditions on the wellbeing of individuals within own service	1.1 Describe the impact of a condition on the **wellbeing** of **individuals** within own service
2. Understand the impact of conditions on the care of individuals	2.1 **Explain** the impact of a condition on the care of individuals

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
3. Understand how current research, policy and guidance informs practice in own specialist area of care	3.1 Discuss how current research, policy and guidance informs own specialist area of care
4. Understand how to access services in order to meet the needs of individuals in own service	4.1 Analyse **services** to support individuals within own specialist area of care
	4.2 Explain referral processes used to access specialist services
5. Understand how to represent the rights and interests of individuals within own specialist area of care	5.1 Discuss how to represent the rights and interests of individuals within own specialist area of care
6. Be able to develop outcomes-based and person-centred practice within own specialist area of care	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

Range

1. Understand the impact of conditions on the wellbeing of individuals within own service

1.1 Wellbeing:

Wellbeing is a broad concept relating to the following areas in particular:

- personal dignity
- physical and mental health
- emotional wellbeing
- 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 wellbeing
- domestic, family and personal relationships

1.1 Individuals:

A person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for.

Range
2. Understand the impact of conditions on the care of individuals
2.1 Explain: 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.
4. Understand how to access services in order to meet the needs of individuals in own service
4.1 Services: A minimum of three services must be analysed.
6. Be able to develop outcomes-based and person-centred practice within own specialist area of care
6.1 Outcomes-based practice: An 'outcome' refers to individuals' aims or objectives – the things individuals want to achieve or need to happen. Outcomes-based practice focuses on supporting individuals to achieve the outcomes most important to them and offers innovative approaches to enable this. **6.1 Person-centred practice:** An approach that sees the individual accessing social care services as an equal partner in their care and support who is at the centre of all decisions relevant to them.

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. 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 (for example, via 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

Delivery and assessment guidance
• team meetings • training materials and resources used to develop team • workforce training – needs analysis and planning • information leaflets on conditions that require specialist help, and on organisations and services that can support with representing the interests and rights of individuals

LMAC 29 Sexuality and sexual health in adult care (M/652/0118)

Unit summary				
The aim of this unit is to provide learners with knowledge and understanding in relation to sexuality and sexual health.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Optional	**Achieved/not yet achieved**	**Level 5**	**3 credits**	**25 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand sexuality and sexual health across the lifespan	1.1 Define the terms: • **sexuality** • **sexual health**
	1.2 Describe sexual development milestones throughout the lifespan
	1.3 Explain how factors impact: • sexuality across the life span • sexual health across the life span
2. Understand the support of sexuality and sexual health for **individuals**	2.1 Discuss approaches to promoting sexual health
	2.2 Analyse national and local interventions to promote sexual health
	2.3 Evaluate specialist services and agencies for the support of sexuality and sexual health

Range
1. Understand sexuality and sexual health across the lifespan
1.1 Sexuality and **sexual health:** Please refer to the World Health Organization (WHO) definition of sexuality and sexual health
2. Understand the support of sexuality and sexual health for individuals
2. Individuals: A person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for.

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. Examples of evidence for the learner portfolio: • care planning cycle • policy and procedural development • research • statement of purpose • training materials and resources

Delivery and assessment guidance
• values statement • workforce development • information about local and national specialist services and agencies

LMAC 30 Transitions in adult care (L/652/0117)

Unit summary				
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.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Optional	**Achieved/not yet achieved**	**Level 5**	**4 credits**	**30 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand transitions in adult care	1.1 Explore theories and approaches in relation to transitions in adult care
	1.2 Discuss legislation, policy and guidance in relation to transitions in adult care
	1.3 Describe types of transitions in adult care
2. Understand the support required for individuals during transitions	2.1 Consider the impact of transitions on individuals
	2.2 Analyse intrinsic and extrinsic factors that contribute to positive transitions
	2.3 Explain how to support **individuals** through transitions
	2.4 Explain **partnership working** to support individuals through transitions
3. Be able to lead and manage practice 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

Range
2. Understand the support required for individuals during transitions
2.3 Individuals: A person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for. **2.4 Partnership working:** Working with the individual, networks, communities and other professionals and organisations.

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. Examples of evidence for the learner portfolio:

Delivery and assessment guidance
• care planning cycle • partnership activity • policy and procedural development • quality improvement plans • referral processes • risk management • team meetings • transition plans and reviews • workforce development

LMAC 31 Leading trauma-informed practice (J/652/0115)

Unit summary				
This unit is aimed at those who work in a wide range of adult care settings. It covers knowledge and skills in relation to leading trauma-informed practice to include theoretical frameworks, principles, impacts, culture and wellbeing strategies.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Optional	**Achieved/not yet achieved**	**Level 5**	**5 credits**	**45 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand theoretical frameworks of trauma-informed practice	1.1 Analyse **theories** and **approaches** underpinning trauma-informed practice
	1.2 Explain key **principles** of trauma-informed practice in relation to adult care
2. Understand the impact of trauma on development, behaviour, relationships and life outcomes	2.1 Analyse the impact of trauma on development, behaviour, relationships and life outcomes
3. Be able to lead development of a trauma-informed culture in adult care	3.1 Evaluate organisational policies and procedures in relation to trauma-informed practice
	3.2 Develop a strategic plan in collaboration that embeds trauma-informed principles across service delivery, workforce development and stakeholder engagement
	3.3 Lead the implementation of the strategic plan ensuring training, reflective practice and trauma sensitive environments are sustained
	3.4 Review the impact of the strategic plan to inform continuous improvement of trauma-informed practice
4. Be able to recognise impact of trauma on self	4.1 Reflect on own responses to trauma exposure
	4.2 Develop strategies for maintaining own resilience and wellbeing
5. Be able to manage the impact of trauma exposure on own team	5.1 Assess risks of vicarious trauma in own organisation
	5.2 Promote a **culture of psychological safety**
	5.3 Evaluate the effectiveness of **support systems** for continuous improvement

Range
1. Understand theoretical frameworks of trauma-informed practice
1.1. Theories: Must include but are not limited to: • neurobiology • psychological • sociological

Range
1.1 Approaches: Must include but are not limited to: • person-centred • strengths-based • empowerment
1.2 Principles: Must include but are not limited to: • safety • trustworthiness • choice and clarity • collaboration • empowerment • inclusivity
5. Be able to manage the impact of trauma exposure on own team
5.2 Culture of psychological safety: Must include but not limited to: • safe space • open dialogue • emotional literacy • trauma-informed leadership
5.3 Support systems: Must include but are not limited to: • supervision • peer support • wellbeing initiatives

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. Learning outcomes 3, 4 and 5 must be assessed in a real work environment. Examples of evidence for the learner portfolio: • care planning cycle • coaching and mentoring activity • continuous professional development (CPD)

Delivery and assessment guidance
• feedback from people who use the services (for example, via service user forums, meetings or surveys, comments and complaints) • induction processes • inspection reports and audits • operational and strategic planning • partnership working activity • performance management • policy and procedural development • referral documentation • research • service evaluation • supervision and appraisal • team meetings • training materials and resources used to develop team • workforce training – needs analysis and planning • information leaflets on conditions that require specialist help, and on organisations and services that can support with representing the interests and rights of individuals

LMAC 32 Supporting neurodiversity in adult care (F/652/0113)

Unit summary				
This unit introduces key concepts such as neurotypical, neurodivergence, and neuroplasticity, and examines different types of neurodivergence. Learners will develop understanding of legislation, services, and strategies for inclusive communication and reasonable adjustments. The unit emphasises reducing barriers to inclusion and evaluating interventions to support neurodiverse individuals effectively. Learners will also develop skills to lead on specific interventions to support neurodiverse individuals.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Optional	**Achieved/not yet achieved**	**Level 5**	**3 credits**	**30 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand different types of neurodiversity	1.1 Explain what is meant by neurotypical, neurodiversity, neurodivergence and neuroplasticity
	1.2 Describe different types of neurodivergence and their associated support needs: • Autism Spectrum Disorder (ASD) • Tourette's Syndrome (TS) • Attention Deficit Hyperactive Disorder (ADHD) • Sensory Processing Disorder (SPD)
2. Understand how to support neurodiverse individuals	2.1 Summarise legislation and policies relevant to supporting neurodiverse individuals
	2.2 Summarise a range of services that provide support for neurodiverse individuals and others
	2.3 Analyse a range of strategies for inclusive communication with neurodiverse individuals
	2.4 Discuss potential barriers to inclusion neurodiverse individuals may experience when accessing health and social care provision
	2.5 Explain a range of reasonable adjustments for neurodiverse individuals and how these can be implemented in health and social care practice
	2.6 Analyse the impact of own attitudes, values and behaviours when supporting neurodiverse individuals
	2.7 Justify the choice of specific interventions for supporting neurodiverse individuals
3. Be able to provide support to neurodiverse individuals	3.1 Lead on specific interventions for supporting neurodiverse individuals
	3.2 Implement reasonable adjustments for neurodiverse individuals

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. Learning outcome (LO) 3 must be assessed in a real work environment.

Theme 10 Aspects of leadership and management

LMAC 33 Business development for adult care (D/652/0112)

Unit summary				
The aim of this unit is to provide learners with the knowledge, understanding and skills required to undertake business planning and development.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Optional	**Achieved/not yet achieved**	**Level 5**	**3 credits**	**25 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand systems and processes in relation to business planning	1.1 Analyse current **drivers** influencing adult care provision
	1.2 Explain how **systems and processes** can be applied to business planning in adult care
2. Understand how to develop a positive culture that supports change and growth	2.1 Analyse strategies that can be used to develop a positive culture that supports change and growth
3. Be able to develop and communicate a business plan for aspects of own service provision	3.1 Assess the current market position of own service provision
	3.2 Identify opportunities for business growth and/or change within own service provision
	3.3 Produce a business plan for business growth and/or change
	3.4 Present business plan to stakeholders for consultation, feedback and to agree allocation of resources
4. Be able to implement and review the business plan	4.1 Lead the implementation of the business plan
	4.2 Evaluate and review the implementation of the business plan
	4.3 Agree and implement recommendations to develop and improve processes and practice in relation to business development

Range
1. Understand systems and processes in relation to business planning
1.1 Drivers: Must include, but are not limited to: • market conditions and trends • regulation and compliance • inspections and audits • sustainability • resources • funding

Range
1.2 Systems and processes: In relation to business planning, could include, but are not limited to: • competitor and stakeholder analysis • governance • setting vision and direction • business design • risk management • planning, implementing, monitoring, feedback, evaluation and review • business strategy and objectives, targets and performance indicators • consultation and collaboration

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. 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 • strength, weakness, opportunity and threat (SWOT) analysis • team meeting • training materials and resources • workforce development plan • business planning meetings

LMAC 34 Coaching and mentoring in adult care (A/652/0111)

Unit summary				
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.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Optional	**Achieved/not yet achieved**	**Level 5**	**3 credits**	**25 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand the role of coaching and mentoring in adult social care	1.1 Discuss models of coaching and mentoring
	1.2 Discuss the difference between coaching and mentoring
	1.3 Describe principles of coaching and mentoring
	1.4 Analyse benefits and limitations of coaching and mentoring
2. Be able to lead and manage coaching or mentoring support in adult care services	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, **individuals** and others

Range

2. Be able to lead and manage coaching or mentoring support in adult care services

2.2 Others:

In this context, ‘others’ could include, but is not limited to, team members, other colleagues, carers and other professionals.

2.4 Individuals:

A person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for.

Delivery and assessment guidance

This unit must be assessed in line with Skills for Care and Development assessment principles guidance.

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

Delivery and assessment guidance
• 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

LMAC 35 Induction in adult care (M/652/0109)

Unit summary				
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.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Optional	**Achieved/not yet achieved**	**Level 5**	**3 credits**	**25 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand the induction of staff in adult care services	1.1 Summarise legislation, regulation, codes of practice and a policy driver in relation to induction processes
	1.2 Evaluate the purpose of induction for practitioners, **individuals, others** and organisations
	1.3 Describe resources and methods to support the induction process
2. Be able to develop induction in adult care services	2.1 Evaluate and review induction processes in own service
	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

Range

1. Understand the induction of staff in adult care services

1.2 Individuals:

A person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing care and support for.

1.2 Others:

In this context, ‘others’ could include, but is not limited to:

- carers, loved ones, family or friends of those accessing care and support services
- colleagues and peers
- team members
- managers and supervisors
- professionals from other services
- visitors to the work setting
- members of the community
- volunteers

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. Examples of evidence for the learner portfolio: • Care Certificate • contracting and/or sourcing internal and external specialist trainers • delivery to staff • feedback and evaluation forms • inspection reports and audits • involvement of individuals in induction activity • job descriptions and person specifications • management induction standards (MIS) • 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

LMAC 36 Manage finance and budgets in adult care (L/652/0108)

Unit summary				
The purpose of this unit is to provide learners with the knowledge, understanding and skills required to manage finance in own area of responsibility in adult care services.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Optional	**Achieved/not yet achieved**	**Level 4**	**4 credits**	**30 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand financial management in own adult care setting	1.1 Explain the importance of effective financial management systems within own setting
	1.2 Outline sources of funding that are used to construct the budget for own setting
	1.3 Outline the roles, responsibilities and accountability of all those involved in financial management of the budget for own setting
2. Be able to plan budget requirements for own area of responsibility	2.1 Work with **others** to calculate the financial resources required to meet objectives within own area of responsibility
	2.2 Communicate budget requirements within remit of role and responsibility to inform overall budget build
	2.3 Analyse the impact of an insufficient budget on service delivery
	2.4 Work with others to prioritise budget allocation in own area of responsibility
3. Be able to manage a budget	3.1 Explain the financial management systems that are available to monitor budget for own area of responsibility
	3.2 Agree roles and responsibilities of others in recording financial expenditure
	3.3 Calculate planned expenditure over the financial period
	3.4 Monitor actual spend against planned expenditure
	3.5 Analyse variances between planned and actual expenditure
	3.6 Implement corrective action to address any variances
	3.7 Make revisions to the budget to take account of variances and new developments
4. Be able to evaluate financial expenditure within own area of responsibility	4.1 Review actual expenditure against planned expenditure within financial period
	4.2 Report findings from budget reviews
	4.3 Make recommendations for adjustments for budget planning and management

Range
2. Be able to plan budget requirement for own area of responsibility
2.1 Others: In this context, ‘others’ could include, but is not limited to:

Range
• colleagues and team members • managers and supervisors • professionals from other services

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. 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

LMAC 37 Recruitment, selection and retention in adult care (D/652/0159)

Unit summary				
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.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Optional	**Achieved/not yet achieved**	**Level 5**	**3 credits**	**25 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand legislation, regulation and organisation requirements for recruitment, selection and retention	1.1 Explain current legislation, regulation and organisational requirements for recruitment, selection and retention
	1.2 Analyse the impact of drivers within adult care on recruitment, selection and retention
2. Understand the recruitment and selection process	2.1 Explain stages within the recruitment and selection process
	2.2 Discuss the importance of **co-production** and involving **individuals** within the recruitment and selection process
3. Understand how to support retention in adult care	3.1 Evaluate strategies to support retention in adult care
4. Be able to manage recruitment and selection processes in own setting	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

Range
2. Understand the recruitment and selection process
2.2 Co-production: An equal relationship between individuals accessing a service and the people responsible for the service. They work together to decide the best way to design and deliver services and implement those decisions together. **2.2 Individuals:** A person accessing care and support. The individual, or individuals, will normally refer to the person or people that the learner is providing are and support for.

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. 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 (for example, job adverts, job descriptions or 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

LMAC 38 Research in adult care (K/652/0107)

Unit summary				
The aim of this unit is to provide learners with the knowledge, understanding and skills required to conduct research to support evidence-based practice in adult care. The evidence produced for this unit will be the research planning and project.				
Assessment				
This unit is internally assessed via a portfolio of evidence.				
Optional	**Achieved/not yet achieved**	**Level 5**	**8 credits**	**55 GLH**

Learning outcomes (LOs) The learner will:	**Assessment criteria (AC)** The learner can:
1. Understand the role of research for evidence-based practice in adult care	1.2 Describe how research develops, improves or identifies gaps in practice and/or provision
	1.3 Explain the value of research for promoting the health and wellbeing of individuals and developing/reviewing cost-effective interventions
	1.4 Discuss how research contributes to the development of own and **others'** professional development
2. Understand research approaches and methodologies	2.1 Consider research approaches and methodologies
	2.2 Describe key stages in a research project
	2.3 Discuss tools used to analyse **data**
3. Be able to plan a research project within adult care	3.1 Justify a topic for research within adult care
	3.2 Develop a research design plan for own setting to include: • topic • aims and objectives • research question and hypothesis • methodology/methodologies
	3.3 Produce a rationale for chosen research methodologies
	3.4 Consider ethical implications that apply to the area of the research project
	3.5 Review literature relevant to research project
4. Be able to conduct a research project within adult care	4.1 Conduct research following the research plan
	4.2 Record and collate data
5. Be able to analyse research findings	5.1 Analyse data from own research
	5.2 Draw conclusions on the analysis of the data
	5.3 Make recommendations for adult care provision

Range
1. Understand the role of research for evidence-based practice in adult care
1.4 Others: In this context, 'others' refers to professionals, which could include, but is not limited to: • colleagues and peers • team members

Range
• managers and supervisors • professionals from other services • volunteers
2. Understand research approaches and methodologies
2.3 Data: Could include, but is not limited to, research, reports, statistics, internal and external feedback, suggestions or complaints.

Delivery and assessment guidance
This unit must be assessed in line with Skills for Care and Development assessment principles guidance. The evidence produced for this unit will be the research planning and project.

NCFE assessment strategy

The key requirements of the assessment strategies or principles that relate to units in this qualification are summarised below.

The centre must ensure that individuals undertaking assessor or quality assurer roles within the centre conform to the assessment requirements for the unit they are assessing or quality assuring.

Knowledge LOs

- assessors will need to be both occupationally knowledgeable and qualified to make assessment decisions
- internal quality assurers (IQAs) will need to be both occupationally knowledgeable and qualified to make quality assurance decisions

Competence/skills LOs

- assessors will need to be both occupationally competent and qualified to make assessment decisions
- IQAs will need to be both occupationally knowledgeable and qualified to make quality assurance decisions

The centre with which the learners are registered will be responsible for making all assessment decisions. Assessors must be **contracted** to work directly with the centre, contributing to all aspects of standardisation. The centre must ensure a process of training is followed, including during induction and quality assurance activities. Occupationally competent and qualified assessors from the centre must use direct observation to assess practical skills-based outcomes.

Sector body assessment strategies and principles

Some units and qualifications must be assessed in line with a sector body's assessment strategy or principles. The centre must ensure that individuals undertaking assessor or quality assurer roles within the centre conform to these requirements for the units/qualifications they are assessing or quality assuring. To access a full copy of the sector body's requirements, please refer to the relevant sector body website; useful links have been provided below.

Skills for Care

Skills for Care and Development Assessment Principles

Section 3: explanation of terms

Level 5

This table explains how the terms used at **level 5** in the unit content are applied to this qualification (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 (for example, adhere to a strict code of practice).
Analyse	Break down the subject or complex situation 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).
Critically analyse	This is a development of 'analyse' that explores limitations as well as positive aspects of the main ideas in order to form a reasoned opinion.
Apply (standards)	Explain how existing knowledge, practices and standards 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.
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 judgement; apply current research or theories to support the evaluation when applicable.
Critically evaluate	This is a development of 'evaluate' where the learner debates the validity of claims from the opposing views and produces a convincing argument to support the conclusion or judgement.
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 that 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, arguments 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 3 aspects to ensure validity.
Work in partnership	Work in association with 2 or more individuals (this may include stakeholders, service users and/or carers).

Section 4: support

Support materials

The following support materials are available to assist with the delivery of this qualification and are available on the NCFE website:

- qualification factsheet

Useful websites

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

- www.england.nhs.uk
- www.gov.uk/government/organisations/office-for-health-improvement-and-disparities
- www.gov.uk/government/organisations/uk-health-security-agency
- www.skillsengland.education.gov.uk
- www.skillsforcare.org.uk/Home.aspx
- www.skillsforhealth.org.uk/

These links are provided as sources of potentially useful information for delivery/learning of this subject area. NCFE do not explicitly endorse any learning resources available on these websites. For official NCFE endorsed learning resources, please see the additional and teaching materials sections on the qualification page on the NCFE website.

Other support materials

The resources and materials used in the delivery of this qualification must be age-appropriate and due consideration should be given to the wellbeing and safeguarding of learners in line with your institute's safeguarding policy when developing or selecting delivery materials.

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**** To continue to improve our levels of customer service, telephone calls may be recorded for training and quality purposes.***

Appendix A

Units

To simplify cross-referencing assessments and quality assurance, we have used a sequential numbering system in this document for each unit.

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

Mandatory units

	Unit number	Regulated unit number	Unit title	Level	Credit	GLH	Notes
	Theme 1 Leadership and management roles and responsibilities						
☆	LMAC 1	Y/652/0110	Leadership and management in adult care	5	4	35	
☆	LMAC 2	H/652/0114	Governance and regulatory processes in adult care	5	5	50	
	LMAC 3	K/652/0116	Decision making in adult care	5	3	25	
☆	LMAC 4	R/652/0119	Business and resource management in adult care	5	4	40	
	Theme 2 Leading and managing teams						
	LMAC 5	D/652/0121	Team leadership in adult care	5	3	25	
	LMAC 6	J/652/0124	Team learning and development in adult care	5	4	35	
	LMAC 7	L/652/0126	Supervising others in adult care	5	5	40	

Unit number	Regulated unit number	Unit title	Level	Credit	GLH	Notes
Theme 3 Responsibilities						
LMAC 8	R/652/0128	Safeguarding in adult care	5	5	35	
☆ LMAC 9	D/652/0130	Mental capacity in adult care	5	3	20	
LMAC 10	H/652/0132	Partnerships in adult care	5	4	35	
LMAC 11	L/652/0135	Comments and complaints in adult care	5	3	20	
Theme 4 Improvements and innovations						
LMAC 12	R/652/0137	Leading the vision in adult care	5	3	25	
☆ LMAC 13	Y/652/0139	Continuous improvement in adult care	5	3	30	
Theme 5 Communication						
LMAC 14	H/652/0141	Effective communication in adult care	5	4	40	
LMAC 15	K/652/0143	Handling information in adult care	5	2	10	
Theme 6 Values and behaviours						
LMAC 16	R/652/0146	Lead person-centred practice in adult care	5	7	55	
LMAC 17	Y/652/0148	Health and wellbeing in adult care	5	4	35	
LMAC 18	K/652/0152	Equality, diversity, inclusion and human rights in adult care	5	2	20	

Theme 7 Health and safety						
LMAC 19	L/652/0153	Health and safety	5	4	40	
Theme 8 Professional development						
LMAC 20	A/652/0149	Continuous development in adult care	5	5	35	
LMAC 21	T/652/0147	Personal wellbeing in adult care	5	3	30	

Optional units

Unit number	Regulated unit number	Unit title	Level	Credit	GLH	Notes
Theme 9 Aspects of support						
LMAC 22	J/652/0142	Advocacy in adult care	5	3	25	
LMAC 23	T/652/0138	Assistive technology in adult care	5	3	25	
LMAC 24	K/652/0134	Digital skills in adult care	5	3	25	
LMAC 25	F/652/0131	Group living in adult care	5	3	25	
LMAC 26	K/652/0125	Healthcare and clinical skills in adult care	5	4	35	
LMAC 27	H/652/0123	Understanding mental capacity in adult care	5	3	25	
LMAC 28	A/652/0120	Specialist areas of care	5	5	40	
LMAC 29	M/652/0118	Sexuality and sexual health in adult care	5	3	25	

Unit number	Regulated unit number	Unit title	Level	Credit	GLH	Notes
LMAC 30	L/652/0117	Transitions in adult care	5	4	30	
LMAC 31	J/652/0115	Leading trauma-informed practice	5	5	45	
LMAC 32	F/652/0113	Supporting neurodiversity in adult care	5	3	30	
Theme 10 Aspects of leadership and management						
LMAC 33	D/652/0112	Business development for adult care	5	3	25	
LMAC 34	A/652/0111	Coaching and mentoring in adult care	5	3	25	
LMAC 35	M/652/0109	Induction in adult care	5	3	25	
LMAC 36	L/652/0108	Manage finance and budgets in adult care	4	4	30	
LMAC 37	D/652/0159	Recruitment, selection and retention in adult care	5	3	25	
LMAC 38	K/652/0107	Research in adult care	5	8	55	

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

Change history record

Version	Publication date	Description of change
v1.0	April 2026	First publication