

Tutor Guidance

NCFE CACHE Level 2 Award in Health and Social
Care

QRN: 603/1909/4

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Section 1: General introduction

Introduction

Welcome to your Level 2 Award in Health and Social Care Tutor Guidance document.

This document includes:

- Tutor hints, tips and teaching aids, including many links to useful websites, which were all accessible at the time of publication.

We hope these tools will assist with the planning and delivery of this qualification as much as possible.

Qualification introduction and purpose

The Level 2 Award in Health and Social Care will enable learners to develop their knowledge and understanding of the health and social care sector.

The qualification provides an introduction to working practices across the range of health and social care provision, roles of practitioners, and person-centred approaches. It also includes human development and well-being across the life stages.

This qualification will be delivered as part of the curriculum for learners studying at key stage 4.

Rules of combination

To gain this qualification, learners must achieve a minimum of a Pass grade in:

- each of the 3 internal mandatory assessments (externally set, internally marked)
- the external synoptic assessment (externally set, externally marked).

Progression

Learners will be able to progress to the next level of learning in health and social care – for example, the Technical Level 3 Certificate in Health and Social Care.

External Assessment - Required for external assessment conducted under examination conditions only

For more information on examination conditions, please see the **Instructions for Conducting Examinations** document on the Joint Council for Qualifications' (JCQ) website: www.jcq.org.uk.

For more information on reasonable adjustments, please refer to the **Good Practice Guide: The Application of Reasonable Adjustments and Special Consideration in Vocational Qualifications** on our website www.cache.org.uk.

Unit achievement log – Level 2 Award in Health and Social Care



Unit ref.	Unit no.	Unit title	Unit type	Level	Guided learning (hours)	Notes
TAHSC 1	L/615/7592	Introduction to the health and social care sector	Knowledge	2	40	
TAHSC 2	R/615/7593	Professional practice and the health and social care practitioner	Knowledge	2	40	
TAHSC 3	Y/615/7594	Human growth and development through the life stages	Knowledge	2	40	

Section 2: Tutor hints and tips

TAHSC 1: Introduction to the health and social care sector



Unit reference	L/615/7592	Unit level	2
Guided learning (hours)	40		
Unit aim	<p>This unit provides learners with a broad and in-depth knowledge base, providing the opportunity to explore the health and social care sector. The learner will be required to apply knowledge and understanding through an internally assessed assignment which will be subject to internal and external quality assurance. Areas that must be included are:</p> <ul style="list-style-type: none"> • types of provision: function and purpose • job roles of health and social care practitioners • access/referral procedures • ever-changing care needs • formal and informal care provision • regulation and inspection. 		

Tutor hints, tips and teaching aids

Scope:

- types of provision: function and purpose
- job roles of health and social care practitioners
- access/referral procedures
- ever-changing care needs
- formal and informal care provision
- regulation and inspection.

Tutor hints, tips and teaching aids

Health and social care provision

Begin this unit by exploring health and social care provision. Use the provision activity detailed below.

Provision activity

Ask learners to research their local area and identify established health and social care services. Encourage learners to consider the functions of individual services and how each meets the care needs of individuals across the life stages. Ask learners to classify each as statutory, private or voluntary provision, giving an explanation for their choices. In asking learners to produce a map of the local area and location of services, outcomes can be recorded. This will allow for later extension of the activity.

Job roles of the health and social care practitioner

Working in small groups, learners can now identify the range of health and social care practitioners working across provision and explore their roles and responsibilities. To facilitate this, obtain sample policies and procedures relevant to health and social care services for learners to review. In groups, learners can highlight key areas of responsibility from the policies and procedures. This will enable them to produce a generic job description. Each group may choose to produce a job description to a specific role. This activity can be built upon in unit TAHSC 2.

Perhaps also invite a practitioner from a local service as a guest speaker to share their experiences of working in health and social care. Learners may wish to prepare questions to ask the speaker prior to the presentation.

Informal care

This would be an appropriate time to introduce the concept of informal care. Learners may agree upon a definition and compare this to a textbook definition. The range of informal carers can then be explored through scenarios. Emphasis can be placed on the complementary role informal carers have in relation to meeting individual needs, as well as working collaboratively with health and social care practitioners. Informal care can be returned to in a later activity to consolidate learning.

Accessing services

Learners need to be aware of the different types of referral and how they would be initiated to gain access to services across the sector. Learners also must gain an understanding of barriers to accessing services and how each may be overcome. The initial provision activity could be revisited here and scenarios posed in relation to a range of individuals, their care needs and potential barriers to access for the services identified.

Scenario

Sally has an appointment with a consultant at the hospital next week. She lives 20 miles away from the hospital.

Once the barrier to access has been identified, learners can explore how to overcome the barrier through group work and share their conclusions. Learners could explore other barriers which Sally may face, such as communication, cultural values and beliefs, cost, resources and so on.

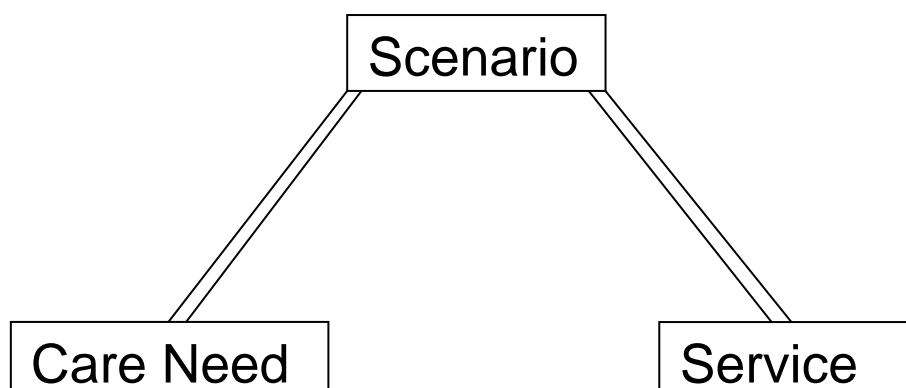
Care needs

To combine elements of learning as well as explore care needs throughout the life stages, use the following activity.

Weaving activity

This activity requires learners to review a set of scenarios to identify individual care needs and how they can be met effectively.

1. Produce cards; some cards will identify a specific care need such as communication or personal care, and some cards will identify health and social care services (ie hospital, residential care home).
2. Produce cards which include various scenarios. For example:
 - George is 72 and has dementia
 - Kayli is 13 and self-harms
 - Sammy is 23 and is struggling to cope with her newborn baby
 - Davy is 53 and is alcohol dependent. He has been told to leave his rented accommodation today
 - Si is 4 and has cerebral palsy. His foster parents are concerned that his mainstream school will not meet his transitional needs.
3. Display the cards around the room.
4. Present a learner with a scenario card.
5. Encourage the learner to identify the individual's care needs as well as services they may access and attach wool to other associated cards as appropriate.
6. Then present a new scenario to a different learner and repeat.
7. Each scenario and associated link will have its own colour of wool.



8. Facilitate a discussion to consider how individual needs are met. This will lead to a group discussion in relation to how health and social care services meet individual needs.
9. Follow this activity with a group discussion on informal care, ask learners to think about the role of informal care in relation to each case study. This will build on the earlier exercise - reinforce links here.

Regulation and inspection

To conclude this unit, introduce regulatory and inspection bodies in health and social care. Explore the role of the Care Quality Commission as well as Ofsted, emphasising links to quality provision. Reports of services could be obtained and used to engage learners during exploration.

Remember it is a requirement of delivery that learners must be able to apply knowledge of health and social care services and/or informal care to meet the care needs of individuals through simulated classroom activities.

TAHSC 2: Professional practice and the health and social care practitioner



Unit reference	R/615/7593	Unit level	2
Guided learning (hours)	40		
Unit aim	This unit provides a broad, in-depth knowledge base from which learners can explore working practice in health and social care. The learner will be required to apply knowledge and understanding through an internally assessed assignment which will be subject to internal and external quality assurance.		

Tutor hints, tips and teaching aids

Scope:

- responsibilities, skills, behaviours and attributes of health and social care practitioners
- professional practice
- professional development
- legal frameworks, values and guidance
- components of person-centred practice
- teamwork and partnership working
- career pathways.

Tutor hints, tips and teaching aids

Responsibilities of health and social care practitioners

Begin this unit by exploring the responsibilities of a range of health and social care practitioners. Obtain job descriptions and person specifications for comparison. If learners engaged with an associated activity in unit TAHSC 1 where job descriptions were devised, similarities and omissions could now be cross-referenced. Learners may then summarise professional skills, behaviours and attributes required of the health and social care practitioner. Encourage outcomes to be shared and discussed as a whole group to check and consolidate learning.

Reinforce here reasons for the health and social care practitioner adhering to their job descriptions. Consider policies and procedures, professionalism, limits and boundaries as well as commitment. Encourage exploration of the consequences for individuals, services and others if practitioners work outside of their job description, and highlight the benefits to all of professional practice in maintaining quality and positive outcomes.

Continuing Professional Development

Continuing Professional Development is key to the health and social care practitioner's role. Use the case study below to explore this area.

Case study

Ralph is 25 years old and has been working as a health and social care practitioner for the last year. He has been asked to consider his professional development plan as part of his preparation for his appraisal next month.

- Who could help Ralph to collate information for his professional development plan?
- What information would be useful to Ralph?
- Why is Ralph's Continuing Professional Development important?
- What is the role of reflection in relation to Continuing Professional Development?
- How does Continuing Professional Development impact upon practice?

Health and social care values

Move on to the legal framework and set a context by introducing the term 'legislation'. In small groups, ask learners to research specific legislation. Through Tutor-led discussion, explore the relationship between legislation and standards. The legislation activity described on the next page would provide a useful starting point.

Legislation activity

1. Pre-prepare A5 cards identifying a piece of legislation or a standard.
2. Select a number of learners to stand at designated points around the classroom holding a card identifying a piece of legislation.
3. Distribute the cards to remaining learners, identifying a standard.
4. Ask learners with a standard card to join the learner holding the related legislation.

Undoubtedly, learners will find it difficult to match standards to one piece of legislation. Therefore, ask the learners with the standards cards to form a small cluster group with any legislation they feel they belong to.

Through discussion, explore how legislation and standards inform job descriptions and person specifications. Take the opportunity to recap and build upon previous learning in relation to roles and responsibilities of the health and social care practitioner. The reasons behind adhering to job descriptions, and the consequences for the health and social care practitioner of not doing so, could be emphasised in a legal context.

Continuing on from this, explore health and social care values. Through Tutor-led discussion, the origin of care values can be established and relationships to legislation and standards be reinforced. The links between care values and the roles and responsibilities of the health and social care practitioner can also be considered by undertaking a review of the job descriptions again. It would be helpful to distribute individual cards identifying care values which learners could use to focus their review. These individual cards identifying care values should be displayed and referred to throughout the teaching and learning of the qualification, as they are integral to practice.

Case studies or role plays including empathy activities are useful tools to explore how individuals accessing health and social care services are valued during daily routines. For example at mealtimes, when engaging in activities and during personal care.

Videos or media reports will also focus learning. Following viewing, learners can consider how values have or have not been applied and the impacts of this.

Person-centred practice

Activities can relate outcomes to the need for personalisation. Through Tutor-led discussion, introduce the concept of person-centred practice. Use case studies to explore a range of person-centred approaches as well as the impacts to individuals. A case study is presented below. This case study can also be used to revisit referral processes covered in unit TAHSC 1 enabling application of learning.

Case study

Alice is 83 years of age. She lives alone and manages her care independently. Following surgery, Alice has asked for respite care to be arranged 200 miles away so that she can recover close to family members. Alice has been refused respite and is forced to spend a further 2 weeks in hospital. Alice finds this distressing and her family is unable to take time away from their employment in order to support her. Alice has been suffering from anxiety attacks since returning home. Alice's son has discovered that his mother's request for respite had never been processed.

Discuss

To consolidate learning, present a scenario outlining a typical day of a health and social care practitioner. In small groups, learners can discuss how the health and social care practitioner must work to ensure a person-centred approach, providing a clear rationale for their reasoning. To summarise outcomes, learners may choose to produce a display illustrating the day. Alternatively, learners may choose to devise a care plan for an individual from a description shared.

Partnership working in health and social care

Returning to the role of the health and social care practitioner, the boundaries of professional relationships can be explored so that learners are able to distinguish between a working relationship and a personal one. Through whole group discussion, encourage learners to consider different working relationships and the values and characteristics that underpin them.

Building upon this, the concept of partnership working can be explored. Introduce the terms 'multi-agency' and 'multi-disciplinary' working. Relate these to national and local approaches to safeguarding to allow application of knowledge and promote understanding. Through simulated role play activities, learners will be able to fully explore partnership working and how partnership working occurs in practice. Role play is also a good way to investigate barriers to partnership working and strategies that can be implemented to overcome these.

Career pathways

To conclude this unit, explore career pathways within the health and social care sector. An event could be organised to which a range of employers are invited and discussions held around various job roles within their services. Opportunities to support career progression can be embedded here.

Following small group research of services and practitioner roles, learners could then produce factsheets, for example 'Your guide to working in the health sector'. Within the factsheets, progression routes could be identified to include training, learning and development needs. A range of sources of information could be accessed to support this activity.

Individually, learners could then access a job description of interest to them and list the qualifications and attributes required for the role. This could then inform the production of a personal development plan which includes own career aspirations, learning needs and short-/medium-/long-term goals. The reasons for implementation of and review of the compiled plan should of course be explored.

Remember it is a requirement of delivery that learners must be able to explore how health and social care values can be applied to individual case studies through simulated classroom activities.

TAHSC 3: Human growth and development through the life stages



Unit reference	Y/615/7594	Unit level	2
Guided learning (hours)	40		
Unit aim	This unit provides breadth and depth of knowledge and understanding in relation to human growth and development through the life stages. Learners will be required to apply their knowledge and understanding through an internally assessed assignment which will be subject to internal and external quality assurance.		

Tutor hints, tips and teaching aids

Scope:

- stages of development from conception to birth
- potential effects on development of pre-conception experiences, pre-birth experiences and during-birth experiences
- life stages:
 - infancy
 - childhood
 - adolescence
 - early, middle and late adulthood
- holistic development
- theoretical perspectives
- factors impacting on human growth and development
- transition and significant life events across life stages
- the role of care planning in relation to meeting individual needs and promoting well-being.

Tutor hints, tips and teaching aids

Human growth and development

Begin this unit by showing a video to introduce the development of a baby from conception to birth. Following viewing, explore content through leading a group discussion. Highlight key words, stages and concepts to direct independent reading. Ask learners to produce a written account to summarise their learning. They may choose to illustrate their summary.

The potential effects on development of pre-conception experiences, pre-birth experiences and birth experiences can then be explored. Introduce this area by facilitating a whole group discussion regarding factors which influence healthy lifestyles.

In small groups, learners can consider the impact of one factor discussed and share their conclusions with the whole group. Next, ask the question: 'How can unhealthy lifestyles of both the mother and father impact on the health of the baby prior to conception?'

Follow this by focusing specifically upon antenatal care for the mother. Encourage learners to design a leaflet for a 'parent-to-be' which identifies the routine tests undertaken. Then as a whole group, discuss the benefits of antenatal care for both the parents and the developing baby.

Finally, outline stages of labour. In pairs, ask learners to explore potential complications at each stage. Outcomes of any research can be shared with peers and summarised on handouts. Be sure to allow time for learners to undertake research.

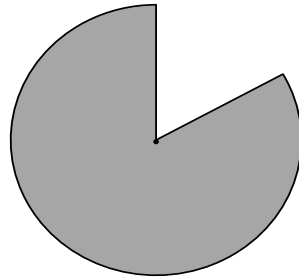
Further development across the life span can now be reviewed. This could be achieved creatively through the production of a development wheel and associated display. The development wheel will identify and explore the key life stages and developments within. It can be used as a reference point to inform several activities (see development wheel diagram).

Remember to refer to the individual cards identifying care values that were introduced in unit TAHSC 2 to enhance the teaching and learning of the qualification, as integral to practice.

The development wheel

1. To produce the development wheel, an inner and outer circle template is required.
2. Divide the outer circle into six equal segments, each being representative of a life stage including infancy, childhood, adolescence, early adulthood, middle adulthood and late adulthood.
3. Cut a segment out of the inner circle. The segment size must be the same as the individual segments in the outer circle.
4. Divide the learners into six groups and assign each group a life stage to research.
5. Ask the learners to illustrate the assigned segment to show developments within the associated life stage. Learners may select pictures from magazines or online resources.
6. Fix the outer circle to the wall.
7. Secure the inner circle to the outer circle. Movement must be enabled.
8. The wheel can now be spun to direct further activities. For example, the wheel can be spun in order to prompt a group discussion or activity around a particular life stage.

The development wheel



In order to understand each life stage in more detail, different activities can be introduced. Learning from these may be captured upon a display which surrounds the development wheel. For example, early developments could be explored through the 'feed the brain' activity described below.

Feed the brain activity

This activity intends to support learners to appreciate the importance of stimulation in relation to neurological brain development. The learners will 'represent' brain activity and 'respond' to a 'stimulus'.

1. Ask one third of the learners to come to the front of the class. Explain to them that they will each represent a human brain. The rotation of their arms will represent brain activity.
2. Give each 'brain' a number for identification.
3. Give the remaining learners cards with an identified positive experience to stimulate activity written upon them (ie play, sing, food). Blank cards can also be distributed to which learners can add their own stimulus. Each card must be numbered and therefore linked to an identified 'brain'.
4. Ensure the number of 'stimuli' allocated to each 'brain' is imbalanced (ie more 'stimuli' allocated to 'brain 5' than to 'brain 3'). Learners with blank cards can choose which 'brain' will link to their identified 'stimulus'. This activity can be made more interesting by including negative experiences that may affect stimulation and subsequent brain activity.
5. Instruct the learners to feed the identified 'brain' in turn with their 'stimulus'.
6. Once fed, the 'brain' will become proportionately activated in response to the 'stimulus'. For example, on receiving a 'stimulus', the 'brain' will become active and the learner will rotate their arms to represent the neural activity. Speed of rotation will indicate levels of activation; the faster the rotation, the more highly the brain is activated.

Following the activity, review the impact of the 'stimuli' upon the 'brains'.

Discussions may include further exploration of brain development in young children. For example, the importance of appropriate stimulation and the influence of the environment. The outcomes from this activity can also be used to inform understanding of holistic development.

As activities are undertaken, learners will add to the development wheel and surrounding display to comprehensively detail developments within each life stage. Learning can be revisited and reinforced with the development wheel acting as a focus point.

Experiences and activities to support individuals at each life stage can be added to the development wheel to consolidate learning. Within this enable exploration of the reasons for recognising and responding to concerns.

Influences on human growth and development

Learners can now explore factors which impact development. To begin, facilitate a nature/nurture debate. Each side of the debate should be directed or led by a Tutor/teaching assistant to maximise outcomes. Following the debate, facilitate a group discussion to explore themes and enable learners to come to independent conclusions in response to evidence presented (eg are we more influenced by nature or by nurture?). Learners should be encouraged to share their conclusions and provide a rationale for any decision-making.

The debate can be built upon through case studies further exploring a range of factors which may impact development. Divide learners into groups and allocate a case study. Each group will focus on a different case study. However, there will be opportunities for all groups to consider each case study prior to sharing feedback. Ensure learning is always related back to human growth and development and that the development wheel and display is referred to and updated. This will result in well-informed activities. Below are some examples of case studies which may be used.

Case study 1

Bill, aged 45 years, has spent time in care and prison. He has never had a job or achieved any qualifications although he has a very high IQ.

Case study 2

Sian, aged 19 years, has Down's syndrome. She works in the local library café and lives with her devoted parents.

Transitions and significant life events

Ask learners to create a timeline to identify transitions and significant life events which may be experienced through each life stage. Once more, learners can add to the development wheel and display.

To conclude this unit, invite a guest speaker to share experiences in relation to the impact of a transition or significant life event. For example, a medical condition or a significant life event pertaining to a specific life stage. Encourage learners to prepare questions in advance.

Scenarios, role plays or timelines can be used to explore the impact of transitions and significant life events as well as the role of the health and social care practitioner in preparing individuals and supporting them through significant life events.

'Personal histories' can be created for individuals currently experiencing a transition or significant life event, accompanied by 'records' from the health and social care practitioner to evidence the support of the individual's needs. In small groups, learners can review the situation and provide an overview. The overview will consider both the potential impact to the individual's well-being and how well the health and social care practitioner has prepared and/or supported each individual during the transition or significant life event. Examples of timelines can be found on the next page.

Conclusions should identify areas of further development for the health and social care practitioner in meeting individual's needs. Ask learners to also evaluate the impact of biological and environmental factors on human growth and development. Learners can then once more explore the importance of recognising and responding to concerns regarding an individual's growth and development.

Examples of timelines:

- 23.08.1959: Jude is born
 - 1965 Jude starts primary school
 - 1968 Jude moves house and school
 - 1971 Jude starts secondary school
 - 1973 Jude's mother dies unexpectedly
 - 1975 Jude takes first job, gets married and has first child
 - 1988 Jude divorces
 - 1992 Jude remarries and has second child.
-
- 10.06.1985: Kris is born
 - 1990 Kris starts primary school and is diagnosed as being on the autism spectrum
 - 2001 Kris starts mainstream secondary school
 - 2003 Kris' grandad dies.
-
- 14.08.1932: Susan is born
 - 1938 Jack born, brother to Susan
 - 1942 Susan goes to live with aunt leaving Jack with dad following periods of depression suffered by Susan's mum.
-
1. Identify the transitions.
 2. Explore the effect on each individual.
 3. Encourage the sharing of conclusions.

Care planning

To conclude this unit, explore the role of care planning in relation to meeting the needs of individuals and promoting well-being. Through whole group discussion consider the purposes of care planning and the care planning cycle. Learners could produce a care plan in response to a given scenario.

Remember it is a requirement of delivery that learners must be able to consider the needs of individuals during transition through the development of a care plan facilitated during simulated classroom activities.

Section 3: Assessment and quality assurance information

Assessment strategy

Knowledge learning outcomes

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

Competence/skills learning outcomes

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

Assessment Structure

To gain the qualification, learners will need to achieve a minimum of a Pass grade in:

- units TAHSC 1, 2 and 3, externally set, internally marked, graded Pass, Merit or Distinction. Mandatory assessments for each unit will be subject to internal and external quality assurance
- component TAHSC/SAE, externally set, externally marked synoptic assessment (Short Answer Examination), graded Pass, Merit or Distinction.

There is no compensation.

Full achievement of the qualification will not be possible until **all** components are achieved. Unit certification will be available for learners achieving a Pass, Merit or Distinction grade for specific units when the full qualification has not been achieved.

There will be no automatic Direct Claim Status (DCS) for this qualification.

Internal assessment

There are **three** (3) externally set, internally marked units: TAHSC 1, 2 and 3.

These internal assessments cover:

- TAHSC 1: 33.3% of the qualification's content and 18.2% of the qualification's grade
- TAHSC 2: 33.3% of the qualification's content and 18.2% of the qualification's grade
- TAHSC 3: 33.3% of the qualification's content and 18.2% of the qualification's grade

The internal assessments will be graded Pass, Merit or Distinction. Mandatory assessments for each unit will be subject to internal and external quality assurance.

External Assessment

There is **one** (1) external assessment.

All content from the 3 mandatory units (TAHSC 1, 2 and 3) is subject to external assessment through a synoptic Short Answer Examination. The synoptic external assessment contributes to 45.5% of the qualification grade.

The Short Answer Examination will be graded Pass, Merit or Distinction. Learners must achieve a Pass grade in the Short Answer Examination in order to gain the qualification.

Within the qualification there is a maximum of one further attempt for learners to take the Short Answer Examination in order to achieve a Pass grade or to improve a grade. This will be a different Short Answer Examination paper.

Re-mark requests for the Short Answer Examination

Centres may request a re-mark if they and the learner do not think that the result is a true reflection of the learner's performance. This request must be made within 20 working days of the result reaching the Centre. A re-mark result may be decreased as well as increased.

Referral in the Short Answer Examination

A result that does not achieve a Pass grade will be graded as Not Yet Achieved. If learners intend to take the Short Answer Examination for another attempt to achieve a Pass grade or above, they will take a different examination paper. This will be the Short Answer Examination for their date of second entry to the examination.

Improving your grade for your Short Answer Examination (upgrade your result)

When learners have achieved a Pass grade or above for the Short Answer Examination, they may wish to improve their grade. If a learner intends to attempt to improve a grade, they will be required to take a different Short Answer Examination, which will be for their date of entry to the examination. Tutors will be able to advise learners on how they can do this. The higher of the grades achieved for the Short Answer Examination will be the final result.

Examination conditions

For more information on examination conditions, please see the **Instructions for Conducting Examinations** document on the Joint Council for Qualifications (JCQ) website www.jcq.org.uk.

For more information on reasonable adjustments, please refer to the **Good Practice Guide: The Application of Reasonable Adjustments and Special Consideration in Vocational Qualifications** on our website.

Rational for synoptic assessment

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

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

There will be **one** (1) externally set and externally marked synoptic assessment covering the content of units TAHSC 1, 2 and 3.

Staffing requirements

Centres delivering any of NCFE's qualifications must:

- have a sufficient number of appropriately qualified/experienced Assessors to assess the volume of learners they intend to register
- have a sufficient number of appropriately qualified/experienced Internal Quality Assurers to internally quality assure the anticipated number of Assessors and learners
- ensure that all staff involved in assessment and internal quality assurance are provided with appropriate training and undertake meaningful and relevant continuing professional development
- implement effective internal quality assurance systems and processes to ensure all assessment decisions are reliable, valid, authentic, sufficient and current. This should include standardisation to ensure consistency of assessment
- provide all staff involved in the assessment process with sufficient time and resources to carry out their roles effectively.

Staff involved in the Assessment and Internal Quality Assurance of this qualification must be able to demonstrate that they have (or are working towards) the relevant occupational knowledge and/or occupational competence, at the same level or higher as the units being assessed and internal quality assured. This may be gained through experience and/or qualifications.

Section 4: Resources and documents

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

Organisation	Website
Acas	www.acas.org.uk
Action on Elder Abuse	www.elderabuse.org.uk
Action on Hearing Loss	www.actiononhearingloss.org.uk
Age UK	www.ageuk.org.uk
Alzheimer's Society	www.alzheimers.org.uk
Ann Craft Trust	www.anncrafttrust.org
British Sign Language	www.britishsignlanguage.com
CareKnowledge	www.careknowledge.com
Care Quality Commission	www.cqc.org.uk
Carers UK	www.carersuk.org
Centers for Disease Control and Prevention	www.cdc.gov
Children & Young People Now	www.cypnow.co.uk
Citizens Advice	www.citizensadvice.org.uk
Community Care	www.communitycare.co.uk
CoramBAAF Adoption & Fostering Academy	www.corambaaf.org.uk
Cruse Bereavement Care	www.cruse.org.uk
Dementia UK	www.dementiauk.org
Department of Health	www.dh.gov.uk
Disabled Living Foundation	www.dlf.org.uk
Equality and Human Rights Commission	www.equalityhumanrights.com
Families Leading Planning UK	www.familiesleadingplanning.co.uk
Foundation for People with Learning Disabilities	www.mentalhealth.org.uk/learning-disabilities
General Medical Council	www.gmc-uk.org
GOV.UK	www.gov.uk
Health and Safety Executive	www.hse.gov.uk
Health Education England	www.hee.nhs.uk/
In Control	www.in-control.org.uk
Mencap	www.mencap.org.uk

Organisation	Website
Mind	www.mind.org.uk
National Careers Service	www.nationalcareersservice.direct.gov.uk
National Children's Bureau	www.ncb.org.uk
National Health Service	www.nhs.uk
National Institute for Health and Care Excellence	www.nice.org.uk
NSPCC	www.nspcc.org.uk
Nursing and Midwifery Council	www.nmc-uk.org
Office for National Statistics	www.ons.gov.uk
Ofsted	www.gov.uk/government/organisations/ofsted
Patient	www.patient.co.uk
Public Health England	www.gov.uk/government/organisations/public-health-england
Respond	www.respond.org.uk
Rethink Mental Illness	www.rethink.org
Royal College of Nursing	www.rcn.org.uk
Royal National Institute of Blind People	www.rnib.org.uk
Skills for Care	www.skillsforcare.org.uk
Skills for Health	www.skillsforhealth.org.uk
Skills for Justice	www.sfjuk.com
Social Care Information and Learning Services	www.scils.co.uk
Social Care Institute for Excellence	www.scie.org.uk
Stress Management Society	www.stress.org.uk
The Fostering Network	www.fostering.net
the Guardian	www.theguardian.com
The Makaton Charity	www.makaton.org
The National Council for Palliative Care	www.ncpc.org.uk
The Royal Society for Public Health	www.rsph.org.uk/
The Tavistock and Portman	www.tavistockandportman.nhs.uk/
World Health Organization	www.who.int

Useful documents

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

- Delivering our Qualifications – Assessment and Internal Quality Assurance Guidance.