

APPLIED DIPLOMA IN HEALTH AND SOCIAL CARE

SAMPLE INTERNAL ASSESSMENT

UNIT 2: CORE VALUES AND SERVICES

For first certification in September 2019

LEARNER ASSIGNMENT BRIEF

APPLIED PURPOSE (AIMS)

• To explain how services and practitioners meet individual needs.

BRIEF

Betty Durant is a 68-year-old woman who lives at home with her husband, 76-year-old Geoffrey. Betty stayed at home to raise the four children she had with Geoffrey and, when they had all grown up and left home, she took a part-time job as a care assistant in a local residential home for the elderly. She retired a few years ago, around the same time that Geoffrey began to show signs of Alzheimer's disease. They live in the house they have owned since getting married and share it with their son, Andrew, who recently moved home following his divorce.

As well as his Alzheimer's disease, Geoffrey has a history of prostate cancer and stroke. Betty has no history of significant illnesses but was recently diagnosed with elevated blood pressure. She has chosen to avoid medication for this and is instead trying to control it with specific dietary adjustments (low fat and low salt) and gentle exercise (walking in the park with friends twice a week).

During a weekly home visit to support Geoffrey's conditions, the community nurse sets aside some time to talk to Betty and answer any questions that she has. Betty shares her own experiences of looking after elderly patients, including those with Alzheimer's disease. She says that it's quite different, taking care of a loved one with the condition.

At a later home visit, to follow up on some changes to Geoffrey's medication, the community nurse notices some changes in Betty's appearance compared with a month ago. Betty is noticeably thinner and looks very tired. When asked about her sleeping patterns, Betty tells the community nurse that she is having trouble sleeping. The nurse asks about Geoffrey's sleeping patterns and discovers that Geoffrey is sleeping well, only getting up once in the night to go to the toilet. The community nurse expresses her concerns about Betty's health and well-being and arranges her next appointment in the evening, when their son, Andrew, is likely to be home.

TASKS

Investigate the services that exist to meet the needs of Betty and Geoffrey.

Task 1

- 1.1 Describe how the principles of care could be used to help meet the needs of Betty and Geoffrey and reference these principles, where appropriate, to key policies and pieces of legislation affecting the work of a community nurse.
- 1.2 Describe how Betty and Geoffrey are protected by codes of practice.

Task 2

Explain how the 6Cs of nursing could be used to promote high quality care for both Betty and Geoffrey.

Task 3

Investigate different approaches to care planning and devise an appropriate care plan for Geoffrey.

Task 4

- 4.1 Research the care and support available for Alzheimer's patients and their carers in your locality and/or region.
- 4.2 Compare and contrast the care provision available for Alzheimer's patients over the past 20 years, and how this provision may change in the next 20 years.

SUMMARY

Task Number	Evidence	Assessment Criteria	Controls
1	Written	AC 1.1 Illustrate the principles of	Time 2 hours
	evidence Presentation	care in relation to work in the sectors AC 3.1 Describe key policies	Resources Access to class notes; no access to Internet; access to ICT software
		and legislation that underpin the work of the sectors	Supervision You will be supervised throughout
		AC 3.2 Explain how individuals at work in the sectors and their	Collaboration Individual task
		patients/clients are protected by laws and codes of practice	Feedback You cannot be given feedback on the work you produce until it has been marked
2	Written/	AC 1.2 Explain the 6Cs of	Time 1 hour
	multimedia evidence	nursing and their relevance to all services	Resources Access to class notes; no access to Internet; access to ICT software
			Supervision You will be supervised throughout
			Collaboration Individual task
			Feedback You cannot be given feedback on the work you produce until it has been marked
3	Written	AC 2.1 Understand approaches	Time 2 hours
	evidence	to care planning AC 2.2 Describe care assessment planning	Resources Access to class notes; no access to Internet; access to ICT software
			Supervision You will be supervised throughout
			Collaboration Individual task
			Feedback You cannot be given feedback on the work you produce until it has been marked
4	Written	AC 4.1 Explain current issues	Time 5 hours
	evidence	and trends in relation to local, regional and national service provision	Resources Access to class notes; access to Internet; access to ICT software
		AC 4.2 Assess local, regional and national service provision in relation to issues and trends	Supervision You will be supervised throughout
			Collaboration Individual task
			Feedback You cannot be given feedback on the work you produce until it has been marked

Total task time: 10 hours

ASSESSOR INFORMATION

WJEC approach to assessment

Unit 2: Core Values and Services is internally assessed and externally moderated. The following principles apply to the assessment of each unit:

- All units are assessed through summative controlled assessment. Details of controls for this unit are provided in this model assignment.
- All assessment criteria must be met under controlled conditions, as specified in this model assignment, for the unit learning outcomes to be achieved.

WJEC Level 3 Applied Diploma in Health and Social Care has adopted the principles of controlled assessment as set out in the Joint Council for Qualifications document 'GCSE, GCE, ELC, Functional skills, Principal learning in the Diploma and Project Qualifications – instructions for conducting coursework'. This document can be accessed through the JCQ website (www.jcq.org.uk). Each centre must ensure that internal assessment is conducted in accordance with these controls.

There are three stages of assessment that will be controlled:

- Task setting
- Task taking
- Task marking

Task setting

WJEC has produced this model assignment for the assessment of this unit. Centres are, however, allowed to modify the assignment, as outlined in the 'Accepted changes to assignments' section of this model assignment. This will allow centres to tailor the assessment to local needs. This model assignment has been written to ensure the following controls are in place:

- Each unit is assessed through one assignment.
- Each assignment must have a brief that sets out an applied purpose. An applied purpose is a reason for completing the tasks that would benefit a health and social care investigation. Further details are in the rationale in section 1.2 of the specification.
- The assignment can specify a number of tasks but tasks must be coherent, i.e. show how the
 assessment requirements all contribute to the achievement of the applied purpose of the
 assignment.
- The assignment must provide each candidate with the opportunity to address all assessment criteria and all the marks available.
- The assignment must indicate the acceptable forms of evidence.
- Where a centre has adapted the model assignment, there must be evidence of qualityassuring its fitness for purpose. Sample documentation for this activity is provided with each model assignment.

How the learner assignment brief meets these controls

This is a single assignment that addresses all assessment criteria for this unit. There is a clear applied purpose: to explain how services and practitioners meet individual needs. The context for the task is fictitious although it has been developed to ensure it is credible and appropriate for the level. The assignment brief provides learners with opportunities to engage with real-life scenarios. All tasks are coherently related to the applied purpose. The summary table makes clear the evidence requirements.

Task taking

There are five areas of task taking that are controlled: time, resources, supervision, collaboration and resubmission.

Time

'Time' has limited control. There are **10** hours available for assessment of this unit. The learner assignment brief suggests how this time can be allocated.

Resources

'Resources' has limited control. The assignment makes clear the type of resources that learners must have access to. As the evidence for task 1 can be presented in any written format, learners should be provided with appropriate ICT software, although the evidence can be hand-written. Learners can have access to class notes, including text books, for all tasks but should not be allowed access to the Internet for task 1, 2 and 3. Access to the Internet is allowed for task 4, where details are available from their class notes. For task 2, evidence can be submitted in any appropriate format, including the use of multimedia.

Supervision

'Supervision' has medium control. Learners must be supervised by an assessor whilst completing tasks. Centres must have systems in place to ensure learners cannot access evidence they have been developing outside of supervised activities.

Authentication

Supervision is in place to ensure the authenticity of evidence produced for summative assessment. Assessors are not expected to provide input or guidance to learners during the controlled assessment time. This includes providing formative feedback on the evidence being produced. Assessors can provide guidance on the requirements of the task and remind learners of the mark bands and how they can be interpreted. Assessors must intervene where there is a health and safety hazard observed.

Learners can review and redraft evidence independently within the time controls for the assessment. Learners cannot redraft based on feedback from an assessor. Learners must sign the declaration in this model assignment to confirm that all evidence submitted for moderation is their own work and that any sources used have been acknowledged.

Assessors must sign the declaration in this model assignment to confirm that evidence submitted for moderation was completed under the controlled conditions set out in the model assignments.

Collaboration

'Collaboration' refers to group work and has limited control. For this model assignment, group work is not permitted.

Task marking

All marking of evidence must be made against the mark bands given in each unit of the specification. Marked evidence must comply with the controlled requirements set out in this model assignment.

Written evidence must be annotated to show how it relates to the assessment criteria and mark band requirements.

Marking should only be undertaken by a designated assessor. An assessor should have appropriate expertise in the subject and level for a specified unit. The assessor is responsible for ensuring that:

- assessment is conducted under specified controlled conditions
- they understand the requirements of the learning outcomes, assessment criteria and mark bands prior to commencing controlled assessment
- evidence presented for assessment is authentic
- assessment decisions are accurately recorded
- evidence is appropriately annotated
- observation records contain sufficient detail for objective corroboration of decisions
- judgements are only made against the assessment criteria and mark bands

ACCEPTED CHANGES TO THIS MODEL ASSIGNMENT

Assignment brief (task setting)

Type of evidence

For this assignment, any format is acceptable. If any task, or part of a task, is presented orally, observation records will be needed as evidence, together with any notes produced and support materials used. Observation records will include a description of candidate performance as well as a summative statement on the quality of that performance. Where performance is observed by someone other than an assessor, the 'witness' must complete a witness statement. Assessors will need to authenticate the statement either through scrutiny of supporting evidence and/or questioning of the learner and/or witness. If the statement is authenticated, it can be allowed to contribute to the evidence for assessment. Evidence of authentication will also need to be included. A standard pro-forma should be developed and used for all learners. Learners should receive a copy of the pro-forma in advance. The content of the observation record should focus on the content and not the style of the oral communication.

Tasks

Only references to the context of the assignment brief can be changed in the tasks.

Purpose

No changes are permitted.

Context

The context must be realistic and credible but can be fictitious. There must be reference to an organisation. The brief must make reference to an appropriate health and social care context and linked to the content of the unit specification. There must also be the possibility of a range of implications resulting from the scenarios.

How assessment is managed (task taking)

Time

The time suggested for each task, as set out in the learner assignment brief, takes account of the contribution of the task to the overall assessment requirements. There can be no changes to the total time available for controlled assessment, as set out in this model assignment. Centres can, however, amend the suggested time available for each task.

Resources

Learners must have access to an assessment grid. Details of essential resources are provided in the summary table of the learner assignment brief and the task-taking: resource section of this Assessor Guidance. There can be no changes to these.

Collaboration

Group work is not permitted for this unit.

Supervision

No changes are permitted.

Feedback

No changes are permitted.

APPLIED DIPLOMA IN HEALTH AND SOCIAL CARE MARK RECORD SHEET

Overall marks awarded for this unit:

Centre no:	
Candidate no:	
DIDATE	
nent must be your own.	
from you, or if you cheat in any other way, you may subject concerned.	be
roduced the attached work without assistance beyond th	at
Date:	
ther with evidence of quality assurance. under the controlled conditions set out in the qualification	on
Signature: Date:	
essment has been quality assured and the grade awarde	ed is
Signature: Date: Date:	
n ret	Candidate no: DIDATE Inent must be your own. from you, or if you cheat in any other way, you may subject concerned. Induced the attached work without assistance beyond the subject concerned work without assistance beyond the subject concerned work without assistance beyond the subject concerned. Date: In the with evidence of quality assurance. In under the controlled conditions set out in the qualification of the subject concerned. Date: Date:

Accoment	Performance Bands				Marks
Assessment Criteria	Band 1 1 – 4 marks	Band 2 5 – 8 marks	Band 3 9 – 12 marks	Band 4 13 – 15 marks	Awarded
	Where there is no evid	lence or work is not wor	thy of credit – 0 marks		
AC 1.1 Illustrate the principles of care in relation to work in the sectors	Illustration of the principles of care in relation to work in the sectors, with generic and/or inappropriate examples.	Illustration of the principles of care in relation to work in the sectors, with appropriate but limited examples.	Detailed and accurate illustration of the principles of care in relation to work in the sectors, with a range of relevant examples.		
Assessor Comments					
AC 1.2 Explain the 6Cs of nursing and their relevance to all services	Identification of the 6Cs of nursing, with little or no explanation of their relevance to services.	Identification of the 6Cs of nursing, with some explanation of their relevance to services. May include some generalised examples.	Detailed explanation of the 6Cs of nursing, with accurate reference to their relevance to all services. May include some relevant examples.		
Assessor Comments					

Accessment	Performance Bands				Morko
Assessment Criteria	Band 1 1 – 4 marks	Band 2 5 – 8 marks	Band 3 9 – 12 marks	Band 4 13 – 15 marks	Marks Awarded
		ence or work is not wor		T	
AC 2.1 Understand approaches to care planning	Identification of approaches to care planning, with little or no evidence of understanding.	Identification of approaches to care planning, with some evidence of understanding.	Detailed description of approaches to care planning, with evidence of understanding.		
Assessor Comments					
AC 2.2 Describe care assessment planning	Identification of the stages of care assessment planning, with little or no description.	Identification of the stages of care assessment planning, with some description.	Detailed description of care assessment planning, with evidence of understanding.		
Assessor Comments					

Accessore	Performance Bands				
Assessment Criteria	Band 1 1 – 4 marks	Band 2 5 – 8 marks	Band 3 9 – 12 marks	Band 4 13 – 15 marks	Marks Awarded
	Where there is no evidence or work is not worthy of credit – 0 marks				
AC 3.1 Describe key policies and legislation that underpin the work of the sectors.	Identification of key policies and legislation that underpin the work of the sectors, with little or no description.	Identification of key policies and legislation that underpin the work of the sectors, with some description.	Detailed description of key policies and legislation that underpin the work of the sectors.		
Assessor Comments					
AC 3.2 Explain how individuals who work in the sectors and their patients/clients are protected by laws and codes of practice	Description of how individuals who work in the sectors and their patients/clients are protected by laws and codes of practice, with little or no explanation.	Description of how individuals who work in the sectors and their patients/clients are protected by laws and codes of practice, with some explanation.	Detailed explanation of how individuals who work in the sectors and their patients/ clients are protected by laws and codes of practice, with evidence of understanding how these apply in specific settings.	Comprehensive explanation of how individuals who work in the sectors and their patients/clients are protected by laws and codes of practice, with clear evidence of understanding of how these are applied in specific settings.	
Assessor Comments					

Assessment	Performance Bands				
Criteria	Band 1 1 – 4 marks	Band 2 5 – 8 marks ence or work is not work	Band 3 9 – 12 marks	Band 4 13 – 15 marks	- Marks Awarded
AC 4.1 Explain current issues and trends in relation to local, regional and national service provision Assessor Comments	Description of current issues and trends in relation to local, regional and national service provision, with little or no explanation.	Description of current issues and trends in relation to local, regional and national service provision, with some explanation.	Explanation of current issues and trends in relation to local, regional and national service provision, with appropriate reasons given.		
AC 4.2 Assess local, regional and national service provision in relation to issues and trends	Description of local, regional and national service provision in relation to current issues and trends, with little or no assessment.	Description of local, regional and national service provision in relation to current issues and trends, with some assessment.	Detailed assessment of local, regional and national service provision in relation to current issues and trends.	Comprehensive assessment of a wide range of local, regional and national service provision in relation to current issues and trends.	
Assessor comments					