



Higher National Unit specification: general information

Unit title: Children and Young People with Additional and/or Complex Needs

Unit code: FW54 35

Superclass: PN

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Unit purpose

This Unit is designed to enable candidates to develop their knowledge and skills in working with children and young people with additional and or complex needs. They will explore and analyse holistic care and evaluate the importance of rights, equality and inclusion which are central to the service delivered. They will critically evaluate the principles of effective communication in acute care settings.

On completion of the Unit the candidate should be able to:

- 1 Analyse the use of play in managing the behaviour of children and young people.
- 2 Analyse holistic care provision for children and young people with additional and/or complex needs.
- 3 Critically evaluate the extent to which equality rights and inclusion are central to service delivery.
- 4 Critically evaluate the principles of effective communication during acute care.

Recommended prior knowledge and skills

It is recommended that candidates have previous experience of learning in the field of children's health and wellbeing, that they are currently working with children and young people and that they have achieved the PDA in Children and Young People's Health and Wellbeing at SCQF level 7 or another appropriate qualification at this level.

General information (cont)

Credit points and level

2 Higher National Unit credits at SCQF level 8: (16 SCQF credit points at SCQF level 8*)

**SCQF credit points are used to allocate credit to qualifications in the Scottish Credit and Qualifications Framework (SCQF). Each qualification in the Framework is allocated a number of SCQF credit points at an SCQF level. There are 12 SCQF levels, ranging from Access 1 to Doctorates.*

Core Skills

There are opportunities to develop the Core Skills of *Communication, Information Communication Technology, Working with Others* and *Problem Solving* to SCQF level 6 in this Unit, although there is no automatic certification of Core Skills or Core Skill components.

Context for delivery

If this Unit is delivered as part of a Group Award, it is recommended that it should be taught and assessed within the subject area of the Group Award to which it contributes.

This Unit is contained within the framework for the PDA in Children and Young People's Health and Wellbeing at SCQF level 8 as a mandatory Unit. It could also be undertaken as continuous professional development for practitioners wishing to update or develop their skills.

Assessment

In order to achieve this Unit, candidates are required to present sufficient evidence that they have met all the Evidence Requirements for each Outcome.

An understanding of both theory and its relation to practice are required for all Outcomes. Hence assessment must include both the requirement to discuss various issues and the opportunity to relate these to practice. Where candidates are already working it is asked that they write about real work situations. Only in exceptional circumstances should a centre-devised hypothetical assessment be used. Candidates are expected to produce evidence relating to undertaking responsibilities as a practitioner wherever possible.

Through ongoing assessment candidates undertaking the PDA in Children and Young People's Health and Wellbeing at SCQF level 8 will develop a portfolio of evidence using the assessments for each of the Outcomes in each Unit. This portfolio approach will enable valid evidence from practice to be generated alongside responses to specific Unit knowledge.

Candidates undertaking this Unit on a standalone basis are recommended to undertake the same assessment as detailed under each Outcome, however they are not required to build a portfolio of evidence.

Higher National Unit specification: statement of standards

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The sections of the Unit stating the Outcomes, Knowledge and/or Skills, and Evidence Requirements are mandatory.

Where evidence for Outcomes is assessed on a sample basis, the whole of the content listed in the Knowledge and/or Skills section must be taught and available for assessment. Candidates should not know in advance the items on which they will be assessed and different items should be sampled on each assessment occasion.

Outcome 1

Analyse the use of play in managing the behaviour of children and young people.

Knowledge and/or Skills

Use of play to identify and diffuse challenging behaviour
Therapeutic play work
Play as part of responsive care
Play as part of respective care
Communicating with creative arts
Helping parents to learn to value play

Evidence Requirements

Candidates will need to provide evidence to demonstrate their Knowledge and/or Skills by showing that they can:

- ◆ Create and develop a resource which helps parents understand and value the role of play in dealing with challenging behaviour.
- ◆ Critically evaluate the concepts of responsive and respective care approaches to therapeutic play work which utilises creative arts.

Assessment Guidelines

It is recommended that the candidate creates a resource tool for use with parents which teaches them about the importance of play in the management of challenging behaviour.

It is recommended that the assessment for this Outcome is an essay of 750–1000 words or equivalent. Candidates should prepare a reflective critique of the literature in which they analyse how they would demonstrate respectful and responsive care with a child and their family in a therapeutic play environment using creative arts.

Where the candidate is completing the Group Award this essay will form part 4 of the portfolio of evidence.

Higher National Unit specification: statement of standards (cont)

Unit title: Children and Young People with Additional and/or Complex Needs

Outcome 2

Analyse holistic care provision for children and young people with additional and/or complex needs.

Knowledge and/or Skills

Holistic care for children and young people with additional needs
Holistic care for children and young people with exceptional healthcare needs
Promoting health
Supporting inclusion
Reviewing services
The World Health Organisation
Complex needs policies and guidelines
Human genetics and specific conditions

Evidence Requirements

Candidates will need to provide evidence to demonstrate their Knowledge and/or Skills by showing that they can:

- ◆ Critically evaluate the concept of holistic care for children and young people with additional/complex healthcare needs.
- ◆ Analyse the guidelines underpinning the delivery of services to children with additional/complex needs.
- ◆ Undertake a critical appraisal of own service and how it would deliver holistic care to an individual young person who has diagnosed complex needs which are the result of a genetic condition.

Assessment Guidelines

It is recommended that the assessment for this Outcome is an essay of 1000–1500 words or equivalent, where the candidate prepares a critical evaluation and analysis of the guidelines relevant to the provision of holistic care for a child or young person with additional/complex needs.

Where the candidate is completing the Group Award this essay will form part 5 of the portfolio of evidence.

Higher National Unit specification: statement of standards (cont)

Unit title: Children and Young People with Additional and/or Complex Needs

Outcome 3

Critically evaluate the extent to which equality rights and inclusion are central to service delivery.

Knowledge and/or Skills

Equality and diversity
UN Convention on the Rights of the child
Role of the Commissioner for Children and Young People
Tackling Indifference
Promoting Inclusion and Wellbeing
Education (Additional Support for Learning) (Scotland) Act 2004
Personal Communication Passports
Communicating pain

Evidence Requirements

Candidates will need to provide evidence to demonstrate their Knowledge and/or Skills by showing that they can:

- ◆ Critically evaluate the implementation of the principles embedded in UN Convention of the Rights of the Child in Scotland Today.
- ◆ Critically evaluate the implementation of the Education (Additional Support for Learning) (Scotland) Act and the introduction of the role of a Commissioner for Children and Young People.
- ◆ Analyse the use of personal communication passports and the ability to communicate pain.

Assessment Guidelines

It is recommended that this Outcome be assessed by means of an essay of 1000–1500 words or equivalent, which critically evaluates the implementation of the Rights of the Child in Scotland today including the relevant legislation for one child or young person with complex needs who uses a personal communication passport.

Where the candidate is completing the Group Award this essay will form part 6 of the portfolio of evidence.

Higher National Unit specification: statement of standards (cont)

Unit title: Children and Young People with Additional and/or Complex Needs

Outcome 4

Critically evaluate the principles of effective communication during acute care.

Knowledge and/or Skills

Building empathy
Partnership with parents
The Warnock Report 1978
Chronic pain in childhood
Acute pain episodes in childhood
Recording and reporting systems
Data protection
Sharing information and confidentiality

Evidence Requirements

Candidates will need to provide evidence to demonstrate their Knowledge and/or Skills by showing that they can:

- ◆ Critically evaluate barriers to parental involvement in acute care.
- ◆ Critically analyse the role of the Warnock Report in changing approaches to working with children and young people experiencing chronic pain.
- ◆ Critically evaluate current recording and reporting systems in line with legislative requirements.

Assessment Guidelines

It is recommended that this Outcome is assessed by a critical reflection of approximately 1000 words or equivalent which is based on working to involve parents in the assessment of pain in acute settings and which addresses possible barriers on the one hand and the major tenets of the Warnock Report on the other hand.

Where the candidate is completing the Group Award this reflective assignment will form part 7 of the portfolio of evidence.

Higher National Unit specification: support notes

Unit title: Children and Young People with Additional and/or Complex Needs

This part of the Unit specification is offered as guidance. The support notes are not mandatory.

While the exact time allocated to this Unit is at the discretion of the centre, the notional design length is 80 hours.

Guidance on the content and context for this Unit

Outcome 1

In this Outcome candidates will focus on the use of play in preventing and diffusing challenging behaviour in children and young people. They should look at studies such as *Keeping the Cool in School* which highlights 6 core strengths for a professional: attachment, self regulation, affiliation, awareness, tolerance and respect (Perry, 2009).

They should understand that responsive care is about knowing and understanding the child. It is about being responsive to the needs of the child, responsive and sensitive to their verbal and non verbal communications, and treating them with respect (LTS, 2005).

The key features in responsive care which can also be applied to other groups can be found on the Learning and Teaching Scotland (LTS) website.

Candidates should know that responsive care will not occur if there is no respect, this is a fundamental principle within the Rights of the Child and their role as professionals is to ensure that it happens.

They should remember that play is a powerful tool which allows the child to explore his/her world. Babies are said to have an inborn desire to learn and develop skills. Indoor and outdoor play is important in this quest, with allowing the child to revisit skills a necessary component (Parlakian and Lerner, 2009). Play helps promote cognitive thinking, social understanding and role relationships, and emotional control, to name but a few. Through play, scientists have been able to plot child development, eg development of grasp and fine motor activity. Creative play has been used for many centuries to teach and develop skills. Theorists take different perspectives on play, eg Piaget looked at cognitive development, whilst Mead looked at self from others and socialisation (Peate and Whiting 2006). Candidates should reflect on the development of therapeutic play and the use of creative arts as a means of helping a child understand and cope more effectively with their condition. Additionally, though, play can be used to treat and heal, avert threat or allow the re-enactment of events (Robinson, 2008).

Useful Reading Includes:

Perry B, 2009. *Keep the Cool in School — Promoting Non-Violent Behaviour in Children*
Available from: <http://teacher.scolastic.com/professional/bruceperry/cool.htm>

http://www.fairplayforchildren.org/index.php?page=Child_Protection_In_Play§ion=What_We_Do

Social Care Institute for Excellence (SCIE) (2010) *Using play and the creative arts to communicate with children and young people.*

Higher National Unit specification: support notes (cont)

Unit title: Children and Young People with Additional and/or Complex Needs

<http://www.scie.org.uk/assets/elearning/communicationskills/cs08/resource/assets/pdfs/Poetry.pdf>

Play Therapy organisation, 2010 Play Therapy.
Available from: www.playtherapy.org.uk

Cohen, D. (2006) The development of play. 3rd ed. Taylor & Francis.

Literacy Trust (2008) Talk to your baby.
Available from: www.literacytrust.org.uk/talktoyourbaby/quicktips.html

Outcome 2

In this Outcome candidates should consider the impact that illness, complex medical issues and conditions can have on children and young people's health and wellbeing, they should look at the types of diseases and disabilities that affect children in the short term as well as the long term. Candidates should consider how to ensure that age appropriate care is delivered particularly where long term treatment is required, eg young people being placed in adult wards in hospital, ensuring that information given is appropriate to the age of the young person.

They should be knowledgeable about the legal issues of consent to treatment and also understand the moral dilemmas that may occur, eg consent to vaccination, birth control.

Throughout the Outcome candidates should be considering the effect of each of the topics on the ability of the child/young person to develop resilience and the important role this plays in helping them to cope with the issues they face.

They should learn to analyse the holistic care provision for children and young people with additional and/or complex needs, they should understand the definitions of significant physical and learning impairment that can be a feature of many chronic and disabling conditions in children and that learning disability is accepted to mean 'those with a significant, lifelong condition that started before adulthood, that affects their development and which means they need help to understand information, learn skills and cope independently' (Scottish Executive, 2000). The term complex needs encompass children with a range of conditions and medical needs, a definition agreed by the Complex Needs Group Scotland (ISD 2006) is 'A child with multiple and complex disabilities has a least two different types of severe or profound impairment such that no one professional, agency or discipline has a monopoly in the assessment and management'.

Candidates should also be aware that Promoting Health, Supporting Inclusion state that 'Children and adults with learning disabilities are people first, and have needs, dreams and aspirations like everyone else. They also have health needs like everyone else' (Scottish Executive, 2002).

Based on this the review of services for people with learning disabilities, in Scotland 'The same as you?' identified that people with learning disabilities should be included, better understood and supported by the communities in which they live. Have information about their needs and the services available so that they can take part, more fully, in decisions

Higher National Unit specification: support notes (cont)

Unit title: Children and Young People with Additional and/or Complex Needs

about them. Be at the centre of decision-making and have more control over their care. Have the same opportunities as others to get a job, develop as individuals, spend time with family and friends, enjoy life and get the extra support they need to do this. Be able to use local services, wherever possible and special services if they need them (Scottish Executive, 2005).

All of these statements need to be at the heart of holistic care provision, as does the importance of recognising and respecting difference and diversity, as identified by NHS Scotland in the 10 Essential Shared Capabilities which aim to ensure that all staff working in mental health services should achieve as best practice and which are best practice for everyone working in health and care.

Candidates should know the World Health Organisation has organised the degree of disability according to how far an individual moves away from the normal distribution of IQ for the general population and they should consider the issues raised by this, eg amount of schooling missed due to illness or treatment, problems of communication, hearing or vision. Learning disabilities may be classified in a number of different ways; genetic, environmental, idiopathic and all areas should be included in the candidates learning.

Candidates should be aware of statistics Delivering a Healthy Future stated that there are approximately 7000 children and young people with a range of complex needs at any one time in Scotland (Scottish Executive, 2007).

Another important topic is patterns of inheritance, human genetics describes the study of inheritance as it occurs in human beings. Genes can be the common factor of the qualities of most human-inherited traits. Genetics is the branch of biology concerned with heredity and individual characteristics. Specific conditions may have a genetic base.

Candidates should know that children and young people with additional needs will also benefit from health promotion; Hall and Elliman consider health promotion in this group to be about limiting the impact of the disease and preventing admissions to tertiary care. Included in this area is the emotional impact of tube feeding and candidates should be aware of the research undertaken by Townsley and Robinson in 2000 which highlighted some of the common problems experienced by children living in the community who require home enteral tube feeding and the article entitled 'Changing from Oral to Enteral Feeding: Impact on Families of Children with Disabilities' by Felicity Hunt.

The National Managed Clinical Network (NMCN) for Children with Exceptional Healthcare Needs (CEN) was formed in March 2009 with the aim to strengthen and develop specialist services for children with complex and exceptional healthcare needs in Scotland. The network aims to define the complexity of the healthcare required rather than the diagnostic label.

Useful Reading Includes:

NES The ten essential shared capabilities Module 1

http://www.lincoln.ac.uk/ccawi/esc/New_Folder/module-1.pdf

Higher National Unit specification: support notes (cont)

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NHS Quality Improvement Scotland (QIS) Best Practice Statement.
Available from: www.nhshealthquality.org

www.cafamily.org.uk/professionals/research/statistics.html.

www.scotgen.org.uk

Hall D and Elliman D. (2006) Health for all children 4th ed Oxford: Oxford University Press.

Moyse K. (ed.) (2009) Promoting health in children and young people. Oxford: Wiley-Blackwell.

Video showing The Emotional Impact of Tube Feeding.

Available from: <http://www.cen.scot.nhs.uk/page-20100202-165651.html>

www.cen.scot.nhs.uk

Hunt, F. (2007) Changing from oral to enteral feeding: impact on families of children with disabilities. Paediatric Nursing 7(19).

Available from: www.scotland.gov.uk/Publications/2008/05/DES2008

Outcome 3

The starting point for this Outcome should be the Scottish Government Disability Equality Scheme 2008-2011 which notes 'Scotland should be a place where all of its people are treated fairly and have the opportunity to fulfil their potential in all aspects of their lives. We know that for many disabled people in Scotland that this vision is not yet a reality. This should lead candidates to consider equality for children and young people with additional and/or complex needs and to understand Scotland's vision and be able to see where it fits into the actual service delivery in their own specific area of practice.

In this Outcome it is recommended that candidates select topics to work on either individually or in small groups, ideally they should study issues that they are not familiar with from their own work practice that are detailed in the knowledge and skills, feedback to the class group would allow for full coverage of all of the topic areas as well as enabling candidates to prepare for assessment. The full list of knowledge should be covered by all candidates.

A good starting point would be the UN Convention on the Rights of the child, UNICEF is the world's leading organisation focusing on children and children's rights, and is the only organisation specifically named as a source of expert assistance and advice on which governments can call (UNICEF 2010).

Candidates should know about the Commissioner for Children and Young People's Act which received Royal Assent in May 2003, as this provided the legislative basis for the appointment of a Commissioner for Children and Young People in Scotland whose primary function is to promote and safeguard the rights of children and young people.

They should also understand Article 23 of UN Convention on the Rights of the Child: 'A child with a disability has the right to live a full and decent life in conditions that promote dignity,

Higher National Unit specification: support notes (cont)

Unit title: Children and Young People with Additional and/or Complex Needs

independence and an active role in the community. Governments must do all they can to promote free care and assistance to children with disability’.

Adam Ingram as Minister for Children and Early Years Government, Politics and Public Administration speaking at the launch of ‘Do the Right Thing: for people who work with children or on their behalf’ (Scottish Government, 2009) stated that this action plan around the UN Rights of the Child will, over the next four years, build on a range of activities to ensure that children in Scotland will have the ‘best start in life, are properly supported to allow them to reach their full potential and that they have the opportunity to lead happy healthy lives in which they are well nurtured and cared for’.

Candidates should consider how far this plan demonstrates the Scottish Government’s commitment to ensuring that children’s rights are considered and incorporated into law, policy and practice and if it does indeed show the values and rights of the child are going to receive prominent attention in our services.

Candidates should also consider the role of the voluntary sector in Scotland in the promotion of the rights of children and young people.

Tackling Indifference is a national overview for healthcare services for people with learning disabilities. It is based on the NHS Quality Improvement Scotland local report for each NHS Board area, and reports on the performance across Scotland against the learning disabilities quality indicators; Promoting Inclusion and Wellbeing and Meeting General Healthcare Needs.

Candidates should consider the implementation of Single Shared Assessment, Activities of Living and Integrated Assessment Framework and also revisit Getting It Right for Every Child (GIRFEC) children and young people’s plan.

Available from: www.scotland.gov.uk/Resource/Doc/1141/0048918.doc

They should also understand the Education (Additional Support for Learning) (Scotland) Act 2004–2009 which created a duty on local authorities, health and social services to work together to develop integrated support for individual children. To ensure parents would have named contacts who offer information and advice; and that they would find it easier to liaise with the local authority and/or their child’s school. The Act places responsibilities on education authorities to ensure they make adequate and efficient provision for such additional support as is required by that child or young person. Every child or young person requires a co-ordinated support plan (CPS) for the provision of additional support if the child or young person has additional support needs arising from; one or more complex factors, those needs are likely to continue for more than a year.

Those needs require significant additional support to be provided by the education authority in the exercise of any of their other functions as well as in the exercise of their functions relating to education, or by one or more appropriate agencies.

The CPS for those children with multiple or complex needs, who need services from several agencies to support their learning, should act as a communication for all those services involved, provided it is regularly reviewed (Scottish Executive, 2004).

Higher National Unit specification: support notes (cont)

Unit title: Children and Young People with Additional and/or Complex Needs

Candidates should be familiar with Personal Communication Passports (PCPs), these are person centred documents for those unable to speak easily for themselves, and were first developed by Sally Millar back in 1991. Since then they have been widely used throughout Scotland, the UK and beyond, for both children and adults with disabilities. Creating a Passport with/for people who have communication support needs is nowadays commonly agreed as an indicator of good practice.

PCPs are a way of detailing and recording the important things about a child to give a holistic overview that supports an individual's transitions between services; a further example of this is Communicating pain. There are many challenges in recognising and assessing pain in children, especially those who have little or no verbal communication. Self reporting has been described as the 'gold standard' in pain assessment; however children unable to communicate, self reporting is not appropriate and other ways require to be found.

Children who have a neurological impairment often have very complex needs and may have chronic and or acute pain as well as frequent procedural pain.

Candidates should know how pain can be recognised, assessed and treated in a child with communication difficulties.

The Paediatric Pain Profile (PPP) is a pain measurement tool that was developed specially to help in assessing and monitoring pain in children with severe neurological impairments, especially those with impairments which lead them to be unable to communicate pain through speech.

The PPP is designed to pick up those behaviours which have been shown in a series of studies to be the most important indicators of pain.

Candidates can register at the site below to gain access to this pain measurement tool.
www.ppprofile.org.uk/

However not all children can express their pain verbally and tell us through other means of their pain. There is much written on the subject and candidates could benefit from looking at the guidelines produced by the Royal College of Nursing and updated in 2009. These guidelines give clarity on which tools for acute pain can be used, not only across the age continuum but also for those with cognitive impairment.

Available from: <http://www.rcn.org.uk/development/practice/pain>

Useful Reading Includes:

www.unicef.org.uk

www.scotland.gov.uk/Topics/People/Young-People/Childrens-Rights#a1

<http://www2.ohchr.org/english/law/crc.htm>

<http://www.sccyp.org.uk/about>

Higher National Unit specification: support notes (cont)

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Gates, B. (2000) Knowing; the importance of diagnosing learning disability. Journal of Learning Disabilities, 4(1), pp5-6.

Oates, B. (2005) Remote and rural paediatric project: Child health services in remote and rural Scotland.

Scottish Executive (2002) Promoting health, supporting inclusion. Edinburgh: Scottish Executive.

www.scotland.gov.uk/Resource/Doc/282927/0085645.pdf

<http://www.legislation.gov.uk/asp/2004/4/contents>

http://www.barnardos.org.uk/what_we_do/our_projects/young_carers.htm

http://www.barnardos.org.uk/what_we_do/our_projects/substance_misuse.htm

<http://www.aberlour.org.uk/home.aspx>
www.enable.org.uk

<http://www.larche.org.uk/>

www.momentumscotland.org

www.autism-in-scotland.org.uk

www.sensescotland.org.uk

http://www.actionforchildren.org.uk/media/144071/get_happy.pdf

<http://www.seemescotland.org.uk/findoutmore/aboutmentalhealthproblemsandstigma/selfharm>

<http://www.isdscotlandarchive.scot.nhs.uk/isd/3630.html>

http://www.seemescotland.org.uk/findoutmore/aboutmentalhealthproblemsandstigma/eating_disorders

http://www.playfieldinstitute.co.uk/information/pdfs/publications/eating_disorders/Eating_disorders_patientguide.pdf

http://en.wikipedia.org/wiki/Teenage_pregnancy_and_sexual_health_in_the_United_Kingdom

<http://www.isdscotlandarchive.scot.nhs.uk/isd/2071.html>

<http://www.lookedafterchildrenscotland.org.uk/>

<http://www.scotland.gov.uk/Resource/Doc/162790/0044282.pdf>

<http://www.studyofadolescence.org.uk/>

www.nhshealthquality.org/hhsqis

Higher National Unit specification: support notes (cont)

Unit title: Children and Young People with Additional and/or Complex Needs

Outcome 4

There is no time that communication is more important than during crisis situations and episodes of acute care need is clearly a crisis for the young person and for the parents as well as all of the professionals involved.

Candidates should reflect on their knowledge of communication and language over the age continuum and how to enhance that in the light of communicating with children of all ages and their families where severe acute pain is present, this will allow them to move towards looking at the sharing of information within the context of an acute setting. It is appropriate at this stage to look at communicating with children and young people in a health care setting specifically recognising that children are part of a family and therefore they have to communicate effectively not only with them but with parents and carers too. Building empathy is critical, building empathy relies on good communication skills, good skills rely on knowledge and understanding. Communication is a partnership.

Communicating with teenagers requires specific skills that are focussed on the importance of listening, establishing confidentiality, being non confrontational, respecting opinions, communicating even if they appear not to be listening, are a few of these that candidates should fully understand. They also need to be aware of the need to record and report on their communications and therefore must take account of what this means for their practice in terms of data protection and freedom of information.

The building of good interpersonal relationships is integral to taking a partnership or family centred approach, this approach is not however new. The Warnock report in 1978 which looked at the education of young people with additional educational needs stated 'Parents can be effective partners only if professionals take notice of what they say, and how they express their needs, and treat their contribution as intrinsically important'.

The values embedded in Warnock provide the standards or qualities that are considered desirable in cultures, organisations and families. Values are learnt not solely through communication, but also through example, thus the teaching of values creates a foundation for healthy choices throughout life. There are many values that are important to healthy lives, eg freedom, compassion, honesty, cleanliness, motivation etc. Like values there are several rights that candidates need to understand the importance of, eg partnership and the right to be involved, the right to confidentiality. However they also need to consider if within the acute setting the right to be pain free is also fundamental.

Following on their research into pain in the previous Outcome candidates should now focus on chronic pain as this poses some different challenges to professionals.

Chronic pain is normally defined as any pain which lasts over three months. Although, as yet, not fully understood, it can be caused by arthritis, sickle cell, haemophilia. It is a disabling pain, both physically and mentally, causing many lost days at school and affects social relationships and family life. Its complexity means that referral to a specialist pain clinic is the best option for assessment and treatment. However we must not forget that even the child with chronic pain can, in addition, suffer from acute pain episodes either through unrelated illness, acute episodes or painful procedures.

Higher National Unit specification: support notes (cont)

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Sharing information and confidentiality candidates should understand that one of their roles is to teach the child, using age appropriate words, and their parents or carers to use pain recognition scales, preferably in advance as this preparation and planning is important, particularly when painful procedures are planned.

They work within a care system as part of a team with whom a positive working relationship is vital, this team may include not only co-workers but outside agencies, such as voluntary agencies, police, or other care systems that may look to them for co-operation and collaboration. Information sharing may therefore be requested. Both Scottish and British governments give guidance on this issue, which is usually then devolved to local authorities to produce local protocols. Candidates will have looked at some of this issues related to this in the Outcome dealing with safeguarding and protecting in the first Unit, however in relation to this Unit they are considering sharing of information in relation to Children and Young People with Additional and/or Complex Needs and in particular in relation to acute conditions.

Useful Reading Includes:

<http://www.education.gov.uk/consultations/downloadableDocs/EveryChildMatters.pdf><http://www.educationengland.org.uk/documents/warnock/warnock00a.html>

Reaney, R.L., Davis, S. and Goddard, J.M. (2009) Effects of chronic pain on children and young people. *British Journal of nursing*, 4(3), pp145–146

http://www.internurse.com/cgi-bin/go.pl/library/article.cgi?uid=41737;article=BJSN_4_3_145_146;format=pdf

Connell, H. (2008) Chronic pain in childhood: what support do they need? *British journal of nursing*, 3(2), pp. 58–61

www.internurse.com/cgi-bin/go.pl/library/article.cgi?uid=28863;article=BJSN325861

Mcgrath, P., Finay, G. and Ritchie, J. (1994) Pain, pain, go away; Helping children with pain. Available from: www.pediatric-pain.ca/files/02/18/PPGA2003.pdf

Guidance on the delivery and assessment of this Unit

In order to achieve this Unit, candidates are required to present sufficient evidence that they have met all the Evidence Requirements for each Outcome. Details of these requirements are given for each Outcome.

Where candidates are studying the Unit alone for continuous professional development they should complete the assignments identified under each of the Outcomes.

Candidates undertaking the PDA in Children and Young People's Health and Wellbeing at SCQF level 8 should complete each of the individual assessments identified in the Unit Outcomes these then come together to develop a portfolio of evidence; this portfolio approach will enable valid evidence from practice to be generated alongside responses to specific Unit knowledge and will become evidence for the SVQ Units which form part of the overall Group Award.

Higher National Unit specification: support notes (cont)

Unit title: Children and Young People with Additional and/or Complex Needs

It is recommended that this Unit be taught following completion of the Unit Safeguarding and Protecting Children and Young People when it forms part of the PDA Group Award.

Online and Distance Learning

This Unit is suitable for open learning, provided there is authentication of the candidate's evidence. For information on normal open learning arrangements, please refer to SQA guide to Assessment and quality assurance of open and distance learning (SQA, 2002).

Opportunities for developing Core Skills

Assessment of this Unit will assume the development of Core Skills necessary in the performance of work tasks at this level. For example, assessments are likely to include the use of appropriate information technology and the demonstration of skills required to undertake presentations written and oral which will include the use of complex information.

Candidates will have the opportunity to develop the following Core Skills:

Communication: Written communications will be developed through candidates producing written work in a variety of formats; oral communication will be developed through discussion, debate and evidence of engagement with other professionals and key people.

Working with Others: Will be developed as candidates will be required to work collaboratively with colleagues from their own and other services in the preparation and research for their assignments.

Information and Communication Technology: Candidates will develop their ICT skills through research and the presentation of written assignments.

Problem Solving: Could be developed through explanations of how the candidate dealt with issues relating to medications and the need to protect individuals from harm and abuse.

Disabled candidates and/or those with additional support needs

The additional support needs of individual candidates should be taken into account when planning learning experiences, selecting assessment instruments, or considering whether any reasonable adjustments may be required. Further advice can be found on our website www.sqa.org.uk/assessmentarrangements

History of changes to Unit

Version	Description of change	Date

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General information for candidates

Unit title: Children and Young People with Additional and/or Complex Needs

In undertaking this Unit you will examine working with children and young people with additional and/or complex needs through a variety of important aspects of practice.

You will begin by considering how structured play can perform a major role in identifying and working with behaviour that is challenging; this will include therapeutic play work and the role of play in the provision of responsive and respectful care. You will also consider how the creative arts can provide a platform for communication particularly where verbal communication skills are limited.

You will consider how working together with parents and helping them to value play can improve and develop communication skills. These fundamental perspectives will lead you to consider the concept of holistic care for children and young people with additional and/or complex needs in relation to the promotion of health and wellbeing, inclusion and specific conditions you may encounter in your work practice. You will also understand the genetic factors that can lead to specific conditions and identify some of the common issues related to these.

You will focus on relevant legislation and policies that inform working with additional and/or complex needs, eg Scottish Government Disability Equality Scheme, the UN Convention on the Rights of the Child, NHS Quality Improvement Scotland, Getting It Right for Every Child (GIRFEC), The Warnock Report.

You will return to how to ensure communications in acute care settings encourage and recognise the role of partnerships with parents and the importance of accurate recording and reporting of information internally and with other disciplines.

Your assessments for each of the Outcomes will provide you with some useful tools to use in your own work practice as well as enabling you to look critically at legislation and policy and the issues relating to working in acute settings.

The individual assignments will form the start of a portfolio of evidence which will build into a comprehensive study of children's health and wellbeing across the whole Award this will also contribute evidence to the SVQ Units which form part of the Group Award.

Where you are completing this Unit on its own for continuous professional development you are not required to maintain a portfolio of evidence however you could choose to retain your evidence in this way if you are considering undertaking SVQ Units to evidence your practice competence.

Assessment of this Unit will assume the development of Core Skills necessary in the performance of work tasks at this level. For example your assessments are likely to include the use of appropriate information and communication technology and the demonstration of skills required to undertake presentations written and oral which will include the use of complex information.

General information for candidates (cont)

Unit title: Children and Young People with Additional and/or Complex Needs

You will have the opportunity to develop the following Core Skills:

Communication: Written communications will be developed through you producing written work in a variety of formats; oral communication will be developed through discussion, debate and evidence of engagement with other professionals and key people.

Working with Others: Will be developed as you will be required to work collaboratively with colleagues from your own and other services in the preparation and research for your assignments.

Information and Communication Technology: You will develop your ICT Skills through research and the presentation of written assignments.

Problem Solving: Will be developed through providing explanations of how you dealt with issues relating to medications and the need to protect individuals from harm and abuse.