



**HEALTH AND SAFETY IN CARE
SETTINGS**

INTERMEDIATE 2

First Edition — published June 2007



National Course Specification

Health and Safety in Care Settings (Intermediate 2)

COURSE CODE **C01E 11**

COURSE STRUCTURE

This Course has three mandatory Units.

The mandatory Units are:

DM5P 11	<i>Prevention of Infection (Intermediate 2)</i>	1 credit (40 hours)
F1P1 11	<i>Healthy Eating in a Care Setting (Intermediate 2)</i>	1 credit (40 hours)
F1P2 11	<i>Maintaining Safety in a Care Setting (Intermediate 2)</i>	1 credit (40 hours)

The Course includes 40 hours over and above the 120 hours for the Units. This may be used for induction, consolidation of learning and support and should be used for completion of the tasks required by the project. This includes those elements of the project which are carried out under supervised and invigilated conditions.

RECOMMENDED ENTRY

While entry is at the discretion of the centre, candidates would normally be expected to have attained one of the following, or equivalent:

- ◆ Care (Intermediate 1) Course or its Units
- ◆ Early Education and Childcare (Intermediate 1) Course or its Units
- ◆ Standard Grade in a social subject at General level
- ◆ Standard Grade Social and Vocational Skills at General level
- ◆ Standard Grade in a science subject at General level

Administrative Information

Publication date: June 2007

Source: Scottish Qualifications Authority

Version: 01

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National Course Specification: (cont)

COURSE Health and Safety in Care Settings (Intermediate 2)

PROGRESSION

This Course or its Units may form part of one or more National Qualification Group Award and may provide progression to:

- ◆ Scottish Vocational Qualifications (SVQs) in Health and Social Care
- ◆ National Certificate in Health and Social Care (Higher)
- ◆ Care (Higher) Course or its Units
- ◆ Early Education and Childcare (Higher) Course or its Units
- ◆ further education
- ◆ training or employment

CREDIT VALUE

The Intermediate 2 Course in Care is allocated 24 SCQF credit points at SCQF level 5*.

**SCQF points are used to allocate credit to qualifications in the Scottish Credit and Qualifications Framework (SCQF). Each qualification 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

It should be noted that this project, in common with other project-based Courses, follows the planning/developing/evaluating cycle. As a result of this the successful completion of the project will lead to automatic certification of the Problem Solving Core Skill at Intermediate 1.

National Course Specification: Course details (cont)

COURSE Health and Safety in Care Settings (Intermediate 2)

RATIONALE

The issues of health and social care are increasingly important due to the increase in the population of care service users. As a result there is a need to encourage young people to qualify as health and social care professionals. Although this Course relates to care settings, the basic principles of healthy eating, safety awareness and hygiene issues to prevent infection, are useful to everyone. Rising rates of food poisoning and hospital acquired infections often make headline news and indicate that knowledge gained in the Units of this Course is useful for everyday life as well as for those intending to pursue a career in care.

The *Health and Safety in Care Settings (Intermediate 2)* Course provides an opportunity for candidates to apply knowledge gained while studying health and safety issues applicable to care settings. It requires the integration of knowledge and skills acquired in the Units and also allows candidates to develop and display Core Skills.

The Course forms an important part of the menu of educational provision, not only for those who have identified the field of care as their chosen career path, but also for any candidates studying at Intermediate 2 who wish to extend their educational experience.

The knowledge acquired in the areas of healthy eating, safety awareness and other issues related to preventing infection in care situations is transferable to other academic or career pathways, particularly those which involve working with people, either individually or as part of a team. This Course can therefore have a number of significant advantages for the candidate. For example it:

- ◆ helps candidates begin to understand the issues applicable to care settings
- ◆ develops candidates' understanding of the needs and requirements related to safe care practice
- ◆ enables candidates to inform and develop their understanding of safe and effective care service provision
- ◆ enables candidates to think of the needs of the service user and how choice is part of care
- ◆ enables candidates to consider the dangers of infection to the vulnerable in care settings.

The aims of this Course are to:

- ◆ raise candidates' awareness of health and safety issues in general as well as in care settings
- ◆ raise awareness of what causes infection, how small the infection organisms are and the ways they might be eradicated
- ◆ promote candidates' knowledge and understanding of the principles of healthy eating, maintaining a safe environment for service users and preventing the spread of infections in care settings
- ◆ understand the importance of the food borne infection in that it is sometimes a threat to life in care settings
- ◆ develop skills in planning, reporting, researching and evaluating performance
- ◆ develop skills and practical experience
- ◆ improve negotiation skills
- ◆ improve time management skills.

National Course Specification: Course details (cont)

COURSE Health and Safety in Care Settings (Intermediate 2)

COURSE CONTENT

The Course consists of three Units *Prevention of Infection (Intermediate 2)*, *Healthy Eating in a Care Setting (Intermediate 2)* and *Maintaining Safety in a Care Setting (Intermediate 2)*.

The Units of this Course are designed to develop knowledge and understanding and skills in relation to care safety issues. Candidates will then demonstrate the application of this knowledge and these skills in the project.

Summary of Unit content

DM5P 11 *Prevention of Infection (Intermediate 2)*

This Unit is designed to develop knowledge and understanding of the causes of infection, the ways in which infection enters the body, the spread of infection and the ways in which the body fights infection. This is complemented by the knowledge and understanding surrounding antiseptic, sterilisation, disinfection procedures and disposal of infected material.

In the Unit the candidates will study:

- ◆ the main groups of pathogenic organisms which currently cause disease in the United Kingdom
- ◆ the entry of pathogens into the body and spread of infection
- ◆ how the spread of infection can be prevented.

F1P1 11 *Promoting Healthy Eating in a Care Setting (Intermediate 2)*

This Unit enables candidates to gain an understanding of the essential foods that form the basis of a balanced diet which is necessary to maintain health and well-being. Candidates will investigate the factors that influence dietary choice. The Unit will enable candidates to learn how to develop menus that meet the dietary requirements of individual service users. Candidates will also learn about good practice and guidelines related to the purchasing, storage and preparation of foods.

In the Unit the candidates will study:

- ◆ how a balanced diet relates to a person's health and well-being
- ◆ good practice related to purchasing, storing and preparing foods to be used in a care setting
- ◆ ways to meet and support the dietary needs of individual service users
- ◆ how to plan and produce an appropriate one day menu for a selected service user.

F1P2 11 *Maintaining Safety in a Care Setting (Intermediate 2)*

The Unit is designed to help candidates understand the importance of maintaining the safety of service users, staff and visitors in the care setting, by gaining knowledge of relevant health and safety legislation, policy guidelines, risk assessment and the levels of responsibility of individuals.

National Course Specification: Course details (cont)

COURSE Health and Safety in Care Settings (Intermediate 2)

In the Unit the candidates will:

- ◆ study how specific legislation is used in maintaining safety in various care settings
- ◆ study the health and safety responsibilities within specific care settings
- ◆ carry out a risk assessment relevant to maintaining the safety of service users, staff and others in a specific care setting.

ASSESSMENT

To achieve the Course award the candidate must achieve the Units as well as pass the Course assessment. The candidate's grade is based on the Course assessment.

Assessment objectives

At Intermediate 2, the key elements of knowledge and understanding, analysis, application and evaluation are assessed in the following ways.

Knowledge and understanding

Candidates should be able to demonstrate reasonably detailed knowledge and understanding of fundamental aspects of health and safety in a care setting, preventing infection and healthy eating. In addition they will learn about relevant concepts, theories and methods employed in these areas. The range of knowledge should extend to an understanding of some aspects of these theoretical and practical issues and their application and importance in care practice. This must also be demonstrated in the candidate's project. The Course assessment allows candidates to see the relevance of the knowledge and skills acquired from the Units. The project requires that theory is used to inform practice. Candidates use their acquired knowledge and skills to solve a problem relevant to a specific care setting. It requires the integration of knowledge from all the Units to provide the required solution.

Analysis

Candidates should be able to present information clearly and focus it on the issues being studied in their project. Candidates should be able to use the language and concepts gained while studying these Units and demonstrate an understanding of the link between theory and practice. Assessment of the chosen project brief should be clear and reasoned and should reflect the candidate's growing confidence in dealing with these types of practical considerations. Candidates should be accurate when dealing with standards, principles, legislation and the language used. Much of the analysis at this level will be descriptive in nature.

Application

Candidates should be able to demonstrate some application of the theories and methods covered in the Units and apply them to care situations. This will include the health and safety, infection control and healthy eating issues involved in their project.

National Course Specification: Course details (cont)

COURSE Health and Safety in Care Settings (Intermediate 2)

Evaluation

Candidates should demonstrate an ability to make reasonable evaluations of the use of care related theories and practical methods. They should also base their evaluations on justified and sustained arguments. Explanations offered and methods used by care professionals in the stimulus material should be examined critically in the context of the project and the conclusions drawn should be well thought out reflecting an understanding of the aims of the project being assessed.

Unit assessment

Written and/or oral recorded evidence is required for **Outcomes 1, 2 3 (a) and 3 (c)** of the Unit *Prevention of Infection (Intermediate 2)*. The evidence should be obtained under controlled, supervised conditions and should last no more than 40 minutes. An appropriate Instrument of Assessment would be an end of Unit test containing short, extended and restricted response questions. The second assessment consists of a short investigation to cover **Outcomes 3 (b) and 3 (d)** and should be carried out at an appropriate point during the Unit. 30 minutes should be allocated for the completion of this assessment.

Written and/or oral recorded evidence is required for **Outcomes 1 and 2** of the Unit *Healthy Eating in a Care Setting (Intermediate 2)*. The evidence should be gathered under controlled, closed-book, supervised conditions within a time limit of 40 minutes. An appropriate Instrument of Assessment would be an end of Unit closed-book test containing structured short answer and restricted response type questions. For **Outcomes 3 and 4** written and/or oral recorded evidence should be generated by the candidate at appropriate points throughout the Unit. Candidates will generate the evidence on their own in response to a clear brief which allows them to achieve both Outcomes and Performance Criteria. An appropriate Instrument of Assessment would be a folio containing evidence relating to the individual tasks.

Written and/or oral recorded evidence is required for **Outcomes 1 and 2** of the Unit *Maintaining Safety in a Care Setting (Intermediate 2)*. The evidence should be gathered under controlled, closed-book, supervised conditions within a time limit of 40 minutes. An appropriate Instrument of Assessment would be an end of Unit closed-book test containing structured short answer and restricted response type questions. For **Outcome 3** written and/or oral recorded evidence produced under supervision in open-book conditions is required. The evidence will be in the form of a completed Risk Assessment. It may be appropriate for this evidence to be produced in response to a given case study. Candidates will be supplied with an appropriate risk assessment form which will allow them to generate this evidence.

Further details about Unit assessment for this Course can be found in the Unit Specifications and the National Assessment Bank (NAB) materials.

Course assessment

The *Health and Safety in Care Settings (Intermediate 2)* Course assessment will be a written or recorded oral report based on one scenario from a choice of three. Each scenario will be accompanied by a clear brief. Candidates will be expected to interpret the brief, gather information, select and manage appropriate materials and resources. They will also be expected to produce a product as outlined in the chosen brief. They will evaluate the product and the process as well as their own contribution to the overall project.

National Course Specification: Course details (cont)

COURSE Health and Safety in Care Settings (Intermediate 2)

There will be a choice of briefs and while the activities to complete the chosen brief may differ slightly, the application of skills and coverage of Course content will be similar.

Further details of the Course assessment are available in the Course Project Specification.

There are four separate cycles of procedures within a session for this Course, linked to completion months of May, August, November or February.

Link between Unit and Course assessment/added value

The choice of project brief selected will determine the amount of a particular Unit that will be used. The Course assessment allows candidates to see the relevance of the knowledge and skills acquired from the Units. The project requires that theory is used to inform practice. Candidates use their acquired knowledge and skills to solve a problem relevant to a specific care setting. It requires integration of knowledge from across the Units of the Course to provide the required solution.

Added value in the Course assessment also comes from promoting various team-working abilities. Since the project is undertaken as a group, candidates are required to show responsibility, negotiation skills and effective time management. Candidates also have the opportunity to develop skills in data management, information retrieval, presentation of material, project planning and evaluation. Candidates should be able to integrate knowledge from across the Course and to apply and adapt skills of analysis and evaluation in differing contexts.

National Course Specification: Course details (cont)

COURSE Health and Safety in Care Settings (Intermediate 2)

GRADE DESCRIPTIONS AT A AND C

The grade awarded will be based on the detailed criteria set out in the Project Specification document. Descriptions given below indicate the nature of the achievement which is required for the awards of A and C in the Course assessment and relate specifically to the subject content. They are intended to assist candidates, teachers, lecturers and users of the qualification and to help establish standards when project work is undertaken. The Project Assessment Document gives Grade Descriptions at A, B and C in relation to generic requirements for a project.

Assessable element	At Grade 'A'	At Grade 'C'
<i>Planning</i>		
Rationale for choice of brief	Detailed rationale linking to Units studied, personal interest current developments, media interest.	Basic reasons relating to Units studied.
Identifies appropriate sources of information	Wide range of sources of information identified.	Basic range of sources of information identified.
Time scale	Realistic time scale.	Time scale which may present a few difficulties.
If carried out as a member of a group	Thorough breakdown of individual roles/tasks.	Basic outline of individual roles/tasks.
If carried out as an individual	Thorough breakdown of tasks.	Basic outline of tasks.
<i>Development</i>		
Product of Brief	High quality of product with clear layout; evidence of detailed relevant research; application of research to the brief is accurate, relevant and extensive.	Basic quality of product with reasonable layout; evidence of basic relevant research; application of research to the brief is basic.
Centre verification of candidate's work	Centre verifies high level of commitment and participation.	Centre verifies adequate level of commitment and participation.
Bibliography	Well presented and comprehensive.	Basic list showing adequate range of sources.

National Course Specification: Course details (cont)

COURSE Health and Safety in Care Settings (Intermediate 2)

Assessable element	At Grade 'A'	At Grade 'C'
<i>Evaluation</i>		
Review of planning and timescale	Thorough review recognising strengths and weaknesses.	Basic review with limited identification of strengths and weaknesses.
Review of research appropriateness/ methods/ agencies	Thorough review recognising strengths and weaknesses in all areas and suggesting possible improvements.	Basic review with limited recognition of strengths and weaknesses and basic comment on improvements.
Review of personal learning — skills knowledge and understanding	Thorough review recognising strengths and weaknesses and suggesting improvements.	Basic review with limited recognition of strengths and weaknesses and limited suggestions for improvements.

ESTIMATES AND APPEALS

Estimates

In preparing estimates, evidence of performance should be considered across the breadth of coverage of the content of the Course and must take account of performance in the whole Course. The mark given to the candidate's completed project by the internal assessor is considered to be the estimate grade for that candidate.

The most accurate method of producing an estimate is for the centre to internally mark the completed project before submission to SQA, using the marking checklists and guidelines given in the Course Project Specification.

Appeals

Since the object of the project is to show the candidate's ability to integrate and apply knowledge and skills from across the Units, NAB evidence from the Units is not relevant for appeals purposes. Therefore when an appeal is made it is essentially a request for a remark of the project. SQA accepts appeals on the basis that a candidate has not performed as well as expected on the day of the Course assessment. In the case of a project completed over a period of time, it is generally difficult to present better evidence than that already presented in the project.

The completed project provides:

- ◆ evidence of practical application of knowledge and skills
- ◆ evidence which samples across all Units
- ◆ evidence which integrates knowledge from across the Course
- ◆ evidence of the ability to perform more complex tasks than those demanded for Unit assessment

National Course Specification: Course details (cont)

COURSE Health and Safety in Care Settings (Intermediate 2)

Individual NAB items, or their equivalent, do not provide sufficient evidence for estimates and appeals on their own. This is because they:

- ◆ only sample across the content of one Unit
- ◆ do not provide evidence to perform more complex tasks than those demanded for Unit Assessment

QUALITY ASSURANCE

All National Courses are subject to external marking and/or verification. Externals Markers, visiting Examiners and Verifiers are trained by SQA to apply national standards.

The Units of all Courses are subject to internal verification and may also be chosen for external verification. This is to ensure that national standards are being applied across all subjects.

Courses may be assessed by a variety of methods. Where marking is undertaken by a trained Marker in their own time, Markers meetings are held to ensure that a consistent standard is applied. The work of all Markers is subject to scrutiny by the Principal Assessor.

To assist centres, Principal Assessor and Senior Verifier reports are published on SQA's website www.sqa.org.uk.

GUIDANCE ON LEARNING AND TEACHING APPROACHES FOR THIS COURSE

In teaching the Units, candidates should have a chance to relate the knowledge base of the Units to situations which could arise in care settings. Thus *Prevention of Infection (Intermediate 2)* should consider how particular risks arise in either childcare settings, health care settings or social care settings and likewise with the Units *Healthy Eating in a Care Setting (Intermediate 2)* and *Maintaining Safety in a Care Setting (Intermediate 2)*.

The use of case studies relating to particular client groups, risk assessments from specific settings and care plans would give candidates the opportunities to see the practical application of the knowledge gained whilst studying these Units.

To promote group work, teaching approaches in the Units should encourage group work for problem solving situations. To prepare candidates for the Course assessment, candidates need to practise planning and evaluation skills.

In delivering the Units there should be a balance between teacher/lecturer presentation and candidate-centered learning. It is important that the candidate not only understands the concepts identified in the Units but can apply them in a practical situation.

National Course Specification: Course details (cont)

COURSE Health and Safety in Care Settings (Intermediate 2)

Candidates should be encouraged to draw on their own experience and observations within the care setting. This does not imply that a practical work placement is required. Instead candidates can draw on experiences such as visits to, for example to nurseries or hospital. A variety of teaching approaches is recommended and candidates should be given every opportunity to participate in activities in a class, in small groups and as individuals. The approach should be candidate-centred and activity-based, but whole-class teaching can play a part in a flexible programme as a means of establishing understanding. In this process it will be essential to include a wide range of interesting stimulus materials and approaches including audio-visual materials, invited speakers, visits, paper-based resources and Information and Communications Technology (ICT) resources. The resources should be accessible, interesting and manageable and should allow candidates to draw and reflect upon their own experiences.

A variety of teaching methods will be used such as:

- ◆ small group exercises
- ◆ group discussion
- ◆ practical demonstrations
- ◆ case studies
- ◆ simulated exercises
- ◆ worksheets
- ◆ individual or group research
- ◆ videos
- ◆ lectures/ visiting speakers
- ◆ use of information and communication technology (ICT) from appropriate and relevant websites
- ◆ visits to care settings

It may be helpful for candidates to have a clear notion of targets and experience ownership of the planned programme. Regular opportunities for remediation and review should be included in the programme. Opportunity could also be given for candidates to:

- ◆ set learning objectives
- ◆ review progress
- ◆ assess and develop existing knowledge
- ◆ seek and receive feedback and support

CANDIDATES WITH DISABILITIES AND/OR ADDITIONAL SUPPORT NEEDS

The additional support needs of individual candidates should be taken into account when planning learning experiences, selecting assessment instruments, or considering alternative Outcomes for this Course. Further advice can be found in the SQA document *Guidance on Assessment Arrangements for Candidates with Disabilities and/or Additional Support Needs* (www.sqa.org.uk).



National Unit Specification: general information

UNIT	Prevention of Infection (Intermediate 2)
CODE	DM5P 11
COURSE	Health and Safety in Care Settings (Intermediate 2)

SUMMARY

This Unit is designed to develop knowledge and understanding of the causes of infection, the ways in which infection enters the body, the spread of infection and the ways in which the body fights infection. This is complemented with the knowledge and understanding surrounding antiseptic, sterilisation, disinfection procedures and disposal of infected material.

This Unit is a mandatory Unit in the project-assessed Course, Health and Safety in Care Settings (Intermediate 2) and is also an optional Unit in the *National Certificate Group Award: Early Education and Childcare (Higher)*. It is also suitable for candidates wishing to study the Unit on its own. The Unit is suitable for candidates who wish to gain employment, or may already be employed, in the early education and childcare sector working under supervision. They may wish to progress on to higher level early education and childcare qualifications. It is also intended that the generic nature of this Unit will facilitate its use by candidates studying a variety of subjects.

OUTCOMES

1. Describe the main groups of pathogenic organisms which currently cause disease in the UK.
2. Explain the entry of pathogens into the body and spread of infection.
3. Explain how the spread of infection can be prevented.

Administrative Information

Superclass:	PH
Publication date:	June 2007
Source:	Scottish Qualifications Authority
Version:	02

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National Unit Specification: general information (cont)

UNIT Prevention of Infection (Intermediate 2)

RECOMMENDED ENTRY

While entry is at the discretion of the centre there are a variety of prior learning experiences which are relevant to candidates wishing to undertake this Unit.

They may also benefit from having attained one of the following, or equivalent:

- ◆ Standard Grade at General level in any relevant subject
- ◆ A Course or Unit in Care at Intermediate 1
- ◆ Courses or Units in any relevant subject at Intermediate 1
- ◆ SVQ or SVQ Units at level 2 in a related subject.

CREDIT VALUE

1 credit at Intermediate 2 (6 SCQF credit points at SCQF level 5*)

**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 is no automatic certification of core skills or core skills components in this Unit.

National Unit Specification: statement of standards

UNIT Prevention of Infection (Intermediate 2)

Acceptable performance in this Unit will be the satisfactory achievement of the standards set out in this part of the Unit Specification. All sections of the statement of standards are mandatory and cannot be altered without reference to the Scottish Qualifications Authority.

OUTCOME 1

Describe the main groups of pathogenic organisms which currently cause disease in the UK.

Performance Criteria

- a) Describe each of the main groups of pathogenic organisms.
- b) Describe the signs and symptoms of an example of each of the main groups.
- c) Describe the signs and symptoms of HIV and Hepatitis B and C.

OUTCOME 2

Explain the entry of pathogens into the body and spread of infection.

Performance Criteria

- a) Describe common sources of infection.
- b) Explain how pathogens enter the body.
- c) Describe how HIV and Hepatitis B and C can enter the body.
- d) Describe the body's immune response to infection at a basic level.

OUTCOME 3

Explain how the spread of infection can be prevented.

Performance Criteria

- a) Describe the main ways in which the spread of infection can be prevented.
- b) Describe procedures for the use of a named disinfectant, a named antiseptic and a named sterilising procedure.
- c) Explain the correct circumstances under which a disinfectant, antiseptic or sterilising agent should be used.
- d) Describe current local procedures for disposing of infected or contaminated material.

EVIDENCE REQUIREMENTS FOR THIS UNIT

Written and/or recorded oral evidence is required to demonstrate that the candidate has achieved all Outcomes and Performance Criteria. A holistic approach to assessment across outcomes should be taken.

The evidence for this part of the Unit should be obtained under controlled, supervised conditions and should last no more than one hour thirty minutes. A single question paper with both extended and restricted response questions, such as illustrated in the National Assessment Bank item for this Unit, could be used. This should be taken on completion of the Unit. Achievement can be decided by the use of a cut off score. In the event of the candidate not achieving the cut off score another instrument of assessment should be used.

National Unit Specification: statement of standards (cont)

UNIT Prevention of Infection (Intermediate 2)

Specific advice

Outcome 2(a): a minimum of **three** sources of infection from the Appendix to the Statement of Standards should be assessed.

Outcome 2(b): a minimum of **three** routes of spread and entry from the Appendix to the Statement of Standards should be assessed.

Outcome 3(b): a minimum **of three** measures from the Appendix to the Statement of Standards should be assessed.

National Unit Specification: support notes

UNIT Prevention of Infection (Intermediate 2)

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 40 hours.

GUIDANCE ON THE CONTENT AND CONTEXT FOR THIS UNIT

Outcome 1

It is important not to over elaborate this outcome as this is like a new language to many candidates. It is important to use specific examples of topical interest to assist candidates' learning. This outcome is to ensure that candidates become familiar with the main groups of pathogens that they are likely to encounter in their vocational area. Protozoa are not specified in the Appendix to the Statement of Standards but could be taught if it was felt that they were relevant. It was felt that although protozoa are important in terms of world disease levels, candidates are less likely to come across them in the UK.

PC (a)

Bacteria

The formation of bacterial spores should be covered since this knowledge is required in Outcome 3 when sterilisation procedures are discussed. Candidates should be taught that bacteria are microscopic, single celled and exist all around us. Some are pathogenic but most are harmless with the potential of becoming pathogenic. We need both harmless and pathogenic bacteria to live in harmony for our own wellbeing. Under favourable conditions bacteria can divide every 10 minutes, producing large numbers quickly. This causes problems in infection. They feed and excrete through their cell walls. Feeding often involves the bacteria producing enzymes which digest the tissue to give them food. This explains why bacterial infections often cause red, damaged tissue and soreness. They can also pass toxins into wounds, e.g. tetanus, while some can form spores. These spores are very difficult to destroy and can survive in the environment for many years. Antibiotics can be used to control bacteria but recent years have seen the growth of resistant strains such as MRSA.

Viruses

They are smaller than bacteria. They cannot reproduce by themselves and must hijack living cells in order to make new viruses and to live. They are unaffected by antibiotics, and difficult to kill because they are often hiding inside host cells. There are few safe, effective anti-viral drugs (most just keep the disease where it is at and not kill it). The main method of control is vaccination.

Fungi

These cause several common skin infections. There are two main types; yeast-like fungi such as thrush and filamentous fungi (moulds) such as athlete's foot and ringworm. They produce enzymes that digest the tissue they are living on. This causes the characteristic redness and soreness.

Parasites

Most animal parasites are large enough to see with the naked eye. Worms, insects and mites could be covered.

All pathogens need four things to grow – time, food, warmth, moisture.

PC (b)

Common examples of pathogens from all four groups in the Appendix to the Statement of Standards should be looked at. In addition, examples could be chosen according to the vocational area that candidates will be working in. However, HIV and Hepatitis B and C should be covered as viral disease by all groups of candidates.

National Unit Specification: support notes (cont)

UNIT Prevention of Infection (Intermediate 2)

Childcare candidates could look at bacterial meningitis, chickenpox or measles as a viral infection, ringworm, oral thrush or thrush on a baby's bottom as a fungal infection and head lice or threadworms as an animal parasite and scabies as a parasitic mite.

Healthcare candidates could look at MRSA as a bacterial infection, winter vomiting virus, thrush as a fungal infection, and scabies as a parasitic mite.

Catering candidates could include Salmonella, E Coli and Listeria as bacterial infections, colds as viral infections, housefly as a means of infection spread by animals, and scabies as a parasitic mite.

Hairdressing and Beauty candidates could look at impetigo as a bacterial disease, warts as a viral disease, ringworm as a fungal disease, and head lice as insect parasites.

Outcome 2

PC (a): Sources of infection should include other people. This could either be due to contact in the active stages of an infection, or due to contact with symptom-less individuals known as carriers. Carriers may be asymptomatic because the infection is in its incubation period, or because the pathogen is kept in check by the immune system, e.g. typhoid. Air may carry infected water droplets or airborne spores. Animals can be a source of infection, e.g. mosquitos can carry malaria, salmonella can be caught from pet reptiles, ringworm from handling guinea pigs, toxicariasis from dog's and cat's faeces. Contaminated food and water are a major source of infection, especially where people do not have access to clean water supplies. Raw poultry is often contaminated with salmonella. Contaminated objects that carry infection may include:

- ◆ children's toys
- ◆ nappies
- ◆ potties
- ◆ dough
- ◆ water
- ◆ baking
- ◆ work surfaces and utensils in the kitchen
- ◆ bedpans and soiled dressings in a care environment
- ◆ environmental sources of infection such as soil are additional examples of fomites.

PC (b): Pathogens are spread by: direct and indirect contact which include hand to hand; droplet infection; infected tissue; in faeces; via indirect contact with contaminated objects; through sexual contact (close skin contact in genital area and/or exchange of body fluids); from mother to foetus in the womb.

Routes of entry include: inhalation of infected droplets; ingesting pathogens on food in water or on contaminated fingers; through breaks in the skin (injection, abrasions, burns, cuts, animal bites); in utero from mother to foetus; through sexual openings; through the eyes and ears; through urethra.

HIV and Hepatitis B and C viruses exist in body fluids such as blood, semen and vaginal fluid. In addition, the Hepatitis B and C virus is found in vomit, urine and saliva, ie in all body fluids. Both viruses are spread by sexual contact due to the exchange of body fluids in utero and blood-to-blood contact (via infected needles, contaminated blood transfusions, tattoos and piercing with infected equipment). In the 1980s in Scotland these two infections were traditionally spread among injecting drug users and gay men. However, it is increasingly being spread through heterosexual contact.

National Unit Specification: support notes (cont)

UNIT Prevention of Infection (Intermediate 2)

This may be a good opportunity to tell candidates about other sexually transmitted diseases such as Chlamydia (bacteria-like microbe), Gonorrhoea (bacteria), Syphilis (bacteria) and genital warts (virus). These have recently been in the press and very much on the increase. They do not hear about them at school or in general life. Teachers and lecturers could discuss them if they felt it was relevant to the candidates.

The Hepatitis B and C virus is more robust than the HIV virus and, unlike HIV, is spread by all body fluids so can be spread by sharing toothbrushes and razor blades. Needle stick injuries in hospitals are an important route and spread of Hepatitis B and C.

PC (d): Candidates should learn about the body's first line of defence; the physical barrier created by intact skin, ear wax, tears and eyelids for the eyes, hairs in the nose, cilia and mucus in the lungs, acid in the stomach, flushing of the bladder with urine, acid pH in the vagina.

If infection does manage to get into the body then the body's second line defences such as the inflammatory response should be discussed. The discussion of the role of white blood cells should be kept simple. A simplified version should name two types of white blood cell; phagocytes which engulf germs and lymphocytes which produce antibodies to fight pathogens. Antibodies should be described as a system of labelling foreign antigens that should not be in the body and is a way of clumping foreign cells before they are destroyed by the phagocytes. The immune system makes specific antibodies which have the right shape to lock on to a particular antigen. Antigens and antibodies fit together perfectly like a key in a lock. After the infection has been quashed, memory cells remain in the body which remember how to make that particular antibody. If the same antigen invades the body at a future date, the memory cells rapidly make millions of antibodies which destroy the pathogen before it has the chance to do any damage. There is no need to mention B cells and T cells though lecturers could include them if they felt it was appropriate and would not confuse the candidates.

Outcome 3

PC (a): The following could be discussed as means of preventing the spread of infection:

- ◆ personal cleanliness; especially hand washing techniques
- ◆ clean water
- ◆ sewage treatment
- ◆ fresh air
- ◆ isolation of infected individuals
- ◆ vaccination (especially for Hepatitis B, tetanus and for childhood illnesses)
- ◆ good diet, medication
- ◆ use of condoms (especially for HIV, Hepatitis B and C and other sexually transmitted diseases)
- ◆ food hygiene procedures (sell by dates, correct storage, reheating policy, correct handling)
- ◆ good hygiene techniques appropriate to their chosen field of work, eg. for childcare candidates disposal of used nappies, potty contents; for health care workers the techniques involved in not spreading infection from patient to another, disposal of contaminated materials, bed washing and general ward cleanliness; for hairdressing candidates, cleanliness of equipment such as combs and scissors, disposal of hair and wet towels.

PC (b): Candidates should be taught the difference between sterilising and disinfecting an object and appreciate when it is appropriate to use each type of method. The difference between sterilising agents, disinfectants and antiseptics should be explained. Disinfectants kill most pathogens and reduce germs to safe levels, although they do not kill bacterial spores. This is adequate for most

National Unit Specification: support notes (cont)

UNIT Prevention of Infection (Intermediate 2)

purposes. Antiseptics are a sub-set of disinfectants. They also reduce germs to safe levels but are mild enough to use on skin and hair. Of the three procedures, only sterilisation will kill all pathogens (including bacterial spores) and leave the object completely germ-free. The only circumstance when sterilisation is essential is when the object to be used may penetrate the skin or body cavities, e.g. surgical implements, tattooing equipment, ear piercing equipment. Being viruses, HIV and Hepatitis B and C are killed by disinfection using undiluted bleach and by sterilisation.

PC (c): Candidates should look at a range of common disinfectants and antiseptics. Different dilutions and immersion times are required for different products. Sterilisation procedures covered could include UV radiation and gas sterilisation. Candidates may find labelling of products confusing, e.g. steam sterilisers and sterilising tablets sold for baby's bottles do not sterilise, they disinfect. However, this is perfectly adequate, as even a new baby can cope with a small number of pathogens. Discussion could be included on the use of antiseptics. These are now felt to delay healing and are not encouraged by the hospitals. Also discussion could include the over use of disinfectants, eg the new range of kitchen cleaners. It is felt that these will cause super bugs in the future. We have used washing up liquid and simple detergents in the past and this was felt to be enough.

PC (d): Candidates should investigate current procedures adopted by their local hospitals, local authority, the local, private or voluntary sectors. Most hospitals have charts showing the colour codes of their disposable sacks. Local Authorities have rules for disposal of infected material and sharps. Nurseries will have rules for disposal of used nappies.

The student will need to read the guidelines issued by their employer, as it is the employee's duty to read and adhere to them, as it is the employer's to produce them. They are for the safety and health of the customer, child or patient and the employee.

GUIDANCE ON LEARNING AND TEACHING APPROACHES FOR THIS UNIT

In delivering this Unit there should be a balance between teacher/lecturer presentation and candidate centred learning. Outcomes 1, 2, and 3 can be explored using a variety of methods:

- ◆ Small group exercises
- ◆ Case studies
- ◆ Worksheets
- ◆ Individual research including the use of relevant web-sites, some are mentioned below
- ◆ Video/audio material
- ◆ Practical workshops
- ◆ Use of text books, periodicals and journals
- ◆ The use of crosswords and quizzes can help candidates learn the difficult vocabulary.

National Unit Specification: support notes (cont)

UNIT Prevention of Infection (Intermediate 2)

Outcome 1

A simple experiment can be carried out to grow bacteria and fungi on agar plates. Swabs can be taken from walls, desks, windows, shoes, sinks, dish cloths, tea towels or ordinary hand towels and then plated onto petri dishes. The plates should be sellotaped and left at room temperature for a week or so. After this time, most plates will have grown a variety of colonies. From this, candidates can see that bacteria and fungi exist all around us. Most of the colonies will consist of harmless microbes, but a minority may be pathogenic. Lecturers should refer to the Microbiology in Schools Advisory Committee (MISAC) for safety advice relating to this experiment (see www.biosci.org.uk/misac). Many standard text books will provide useful diagrams and information about pathogens. The Meningitis Research Foundation (www.meningitis.org) provides useful leaflets and other materials.

Outcome 2

The approaches to teaching could involve collecting examples of reported infection, producing charts and posters and using newspapers and the internet. A great deal of information is available through the Health Education Unit, Meningitis Trust. Much of the detail in PC (d) is required to be given in a handout format as it is often too complicated in text books.

Outcome 3

Candidates should discuss examples relevant to their vocational area of choice. All student groups will benefit from an emphasis on preventing food poisoning. Candidates can discuss real examples of outbreaks of disease and how they can be prevented, e.g. SARS, E.Coli, kitchen hazards, (ROSPA) contains much useful material. NHS Scotland (formerly Health Education Board Scotland) has commissioned a booklet on food poisoning which is available free in small quantities or by purchase. It can be used with question sheets or case studies as a returnable resource. This could include salmonella for child care candidates - recent years have seen outbreaks in Edinburgh nurseries. Discussion over communal tasks could take place, eg. use of sand, water, dough and cookery.

Outcome 3 (b) and (c) can be taught by a combination of theory and practical demonstrations. If UV 'hand washing' kits are available these can illustrate the importance of effective hand washing. Various disinfectants and antiseptics can be purchased and candidates asked to identify uses, dilutions and immersion times for each. For Health Care candidates a visit to the Sterilising Unit of the local hospital gives candidates the chance to see commercial autoclaves. Otherwise a simple pressure cooker can be used to illustrate sterilisation. Hairdressing or Beauty candidates could investigate the UV sterilisers frequently used in salons. Nowadays a lot of equipment is disposable which makes it safer for patients but increases costs and disposal problems. Child care candidates could look at different options for bottle disinfection (called 'sterilisation' by the manufacturers) and their merits.

GUIDANCE ON APPROACHES TO ASSESSMENT FOR THIS UNIT

The assessment for this Unit is laid out clearly in the Evidence Requirements section of the Statement of Standards of this specification. The standard to be applied is exemplified in the National Assessment Bank item for this Unit. If a centre wishes to design its own assessments for this Unit, they should be of a comparable standard. As indicated, question paper based assessment should be carried out under supervision and should last no more than one hour and thirty minutes.

A holistic approach to assessment across outcomes and other Units, where appropriate, should be taken.

National Unit Specification: support notes (cont)

UNIT Prevention of Infection (Intermediate 2)

CANDIDATES WITH ADDITIONAL SUPPORT NEEDS

This Unit Specification is intended to ensure that there are no artificial barriers to learning or assessment. The additional support needs of individual candidates should be taken into account when planning learning experiences, selecting assessment instruments or considering alternative Outcomes for Units. For information on these, please refer to the document *Guidance on Assessment Arrangements for Candidates with Disabilities and/or Additional Support Needs* (SQA, 2004).

National Unit Specification: Appendix to the Statement of Standards

UNIT Prevention of Infection (Intermediate 2)

OUTCOME 1

The four main groups of pathogens to be covered are:
bacteria; viruses; fungi; small animal parasites.

PC (a) Animal parasites: worms, mites and insects should be covered.

OUTCOME 2

PC (a): Sources of infection taught should be:
other people, air, animals, food and water, contaminated objects (fomites).

PC (b): Routes of entry taught should include:
inhalation; ingestion; in utero; through breaks in the skin; through natural body openings such as the sexual openings and urethra.

Note that some small animal parasites and some fungal infections will not actually enter inside the body, but will attach themselves to the skin or hair of the person and live 'on' rather than inside them.

PC (d): Candidates should learn about the body's first line of defence and second line defences, such as, the inflammatory response, phagocytosis, the production of antibodies and memory cells.

OUTCOME 3

PC (b): The range of methods covered should include:
stringent hand washing, vaccination, food hygiene procedures, basic hygienic practices and the use of condoms for sexually transmitted disease.



National Unit Specification: general information

UNIT Healthy Eating in a Care Setting (Intermediate 2)

CODE F1P1 11

COURSE Health and Safety in a Care setting (Intermediate 2)

SUMMARY

This is a mandatory Unit in the *Health and Safety in a Care Setting (Intermediate 2)* Course but it can also be taken as a free-standing Unit.

This Unit enables candidates to gain an understanding of the essential foods that form the basis of a balanced diet which is necessary to maintain health and well-being. Candidates will investigate the factors that influence dietary choice. The Unit will enable candidates to learn how to develop menus that meet the dietary requirements of individual service users. Candidates will also learn of good practice and guidelines related to the purchasing, storage and preparation of foods.

The Unit is suitable for candidates who wish to gain employment at support worker level in the Health and Social Care sectors. It is also suitable for those who wish to progress to further study at a Further Education College or Higher Education Institution.

OUTCOMES

- 1 Explain how a balanced diet contributes to a person's health and well-being.
- 2 Explain good practice related to purchasing, storing and preparing foods and its importance in a care setting.
- 3 Investigate ways to meet and support the dietary needs of individual service users.
- 4 Plan an appropriate one day menu for a selected service user.

Administrative Information

Superclass: NH

Publication date: June 2007

Source: Scottish Qualifications Authority

Version: 01

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National Unit Specification: general information (cont)

UNIT Healthy Eating in a Care Setting (Intermediate 2)

RECOMMENDED ENTRY

While entry is at the discretion of the centre, candidates would normally be expected to have attained one of the following, or equivalent:

- ◆ Care (Intermediate 1) Course or Units
- ◆ Early Education and Childcare (Intermediate 1) Course or Units
- ◆ Standard Grade in a social subject at General level
- ◆ Standard Grade Social and Vocational Skills at General level
- ◆ Standard Grade in a science subject at General level

CREDIT VALUE

1 credit at Intermediate 2 (6 SCQF credit points at SCQF level 5*)

**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 is no automatic certification of Core Skills or Core Skills components in this Unit.

National Unit Specification: statement of standards

UNIT Healthy Eating in a Care Setting (Intermediate 2)

Acceptable performance in this Unit will be the satisfactory achievement of the standards set out in this part of the Unit Specification. All sections of the statement of standards are mandatory and cannot be altered without reference to the Scottish Qualifications Authority.

OUTCOME 1

Explain how a balanced diet contributes to a person's health and well-being.

Performance Criteria

- (a) State the main food groups.
- (b) Explain what constitutes a balanced diet in relation to current nutritional guidelines.
- (c) Explain the need for essential nutrients and how they contribute to health and well-being.
- (d) Identify foods containing each of the essential nutrients.

OUTCOME 2

Explain good practice related to purchasing, storing and preparing foods and its importance in a care setting.

Performance Criteria

- (a) Describe the main considerations related to purchasing of foods.
- (b) Describe food storage methods in terms of current guidelines.
- (c) Describe current good hygienic practice related to food preparation.
- (d) Explain why it is essential to prevent food borne infection in care settings.

OUTCOME 3

Investigate ways to meet and support the dietary needs of individual service users.

Performance Criteria

- (a) Identify and describe the main factors that influence dietary choice.
- (b) Identify and explain the way dietary provision may be varied to meet different service users health needs.
- (c) Identify and describe the responsibilities of the care worker in supporting dietary needs.

OUTCOME 4

Plan an appropriate one day menu for a selected service user.

Performance Criteria

- (a) Identify and describe the dietary needs of the selected service user.
- (b) Plan a one day menu for the selected service user.
- (c) Explain the choice of food within the planned one day diet.

National Unit Specification: statement of standards (cont)

UNIT Healthy Eating in a Care Setting (Intermediate 2)

EVIDENCE REQUIREMENTS FOR THIS UNIT

The mandatory content for this Unit can be found in the appendix at the end of the Unit specification

Evidence is required to demonstrate that candidates have achieved all Outcomes and Performance Criteria.

Outcomes 1 and 2

Written and/or oral evidence is required which demonstrates that the candidate has achieved Outcomes 1 and 2 to the standard specified in the Outcomes and Performance Criteria. The evidence for these Outcomes must be obtained under controlled supervised conditions. The assessment must be closed-book and will last no more than 40 minutes.

As candidates will increase their knowledge, understanding and skills throughout their study, assessment should take place towards the end of the Unit. The use of a cut-off score may be appropriate for this assessment.

Each assessment should sample across the mandatory content of the Unit and contain questions which require candidates to generate evidence in relation to:

- ◆ **three** of the main food groups
- ◆ what constitutes a balanced diet
- ◆ **three** essential nutrients and each of their functions in maintaining health and wellbeing
- ◆ **three** food groups containing each of the identified nutrients
- ◆ **three** considerations related to purchasing of foods for care settings
- ◆ **three** food storage methods in line with current guidelines
- ◆ **three** current food hygiene practices related to food preparation
- ◆ **one** reason why food borne infection is especially dangerous in a care setting

Outcome 3 and 4

Written and/or oral recorded evidence of the candidate's investigation is required. This will be generated by the candidate at appropriate points throughout the Unit. Candidates will be given a clear brief which allows them to achieve the Outcome and Performance Criteria. It would be appropriate for candidates to produce the findings of their investigation in a folio.

The candidate will choose a **hypothetical service user** who will be recovering from an acute illness or living with a chronic condition. The candidate will indicate which illness or condition they have chosen for their investigation and research this through the use of books or the internet.

An appropriate instrument of assessment would be a folio containing a report and a one day diet sheet.

National Unit Specification: statement of standards (cont)

UNIT Healthy Eating in a Care Setting (Intermediate 2)

Folio

This folio will contain a report on:

- ◆ The main factors that influence dietary choice for their selected service user.
- ◆ The reasons for their choices in the menu.
- ◆ The responsibilities of the carer in supporting the dietary needs of the service user.

This folio would also contain a one day diet sheet.

The teacher /lecturer must ensure the folio is the candidate's own work and it is recommended that meetings before starting the investigation where they will discuss the candidate's choice of hypothetical service user and a meeting at the end to discuss the evidence produced.

The standard to be applied, the breadth of coverage and an appropriate cut-off score are illustrated in the National Assessment Bank (NAB) pack available for this Unit. If a centre wishes to design its own assessments they should be of a comparable standard.

National Unit Specification: support notes

UNIT Healthy Eating in a Care Setting (Intermediate 2)

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 40 hours.

GUIDANCE ON THE CONTENT AND CONTEXT FOR THIS UNIT

The mandatory content for this Unit can be found in the appendix at the end of the Unit specification

This is a mandatory Unit in the *Health and Safety in Care Settings (Intermediate 2)* Course it is also included in the Optional Section of the National Certificate in Health and Social Care and can be taken as a free standing Unit.

Outcome 1

The explanation of a balanced diet should be introduced as a varied diet both interesting and enjoyable. Candidates should be aware of the main food groups: bread, other cereals and potatoes, fruit and vegetables, milk and dairy products, high-protein foods, fats, oils and sugars, including fibre and water.

No one food group provides all of the essential nutrients. We need a balance to ensure good health and well-being, candidates should be aware of the current nutritional guidelines.

It is important that candidates are aware of the essential nutrients: carbohydrates, proteins, fats, minerals, vitamins, fibre and water. Although the latter are not nutrients they are essential for health. Candidates should understand where nutrients and fibre are found in relation to the food groups and their role in maintaining health and well-being.

Outcome 2

Candidates should be aware of the main considerations when purchasing food, the importance of reading labels noting nutritional content, use by dates, best before dates, storage requirements, and cooking instructions. The importance of paying particular attention to food storage should be addressed in relation to preventing food poisoning: fridge temperature 0–5 degrees centigrade, freezer temperature (minus 18 degrees centigrade), storage of raw and cooked foods and storage of dried foods. Candidates should also recognise the importance of good personal and environmental hygiene related to both the storage and preparation of food.

Candidates should explain why it is essential to prevent food borne infection in care.

Candidates could investigate previous outbreaks through the media and their effect on care homes or hospitals.

National Unit Specification: support notes (cont)

UNIT Healthy Eating in a Care Setting (Intermediate 2)

Outcome 3 and 4

In this investigation candidates should be discouraged from approaching service users although they may obtain information from their family or friends. They should research their information from the media.

There are many factors that affect dietary choice: age/stage of development, culture/religion, medical conditions, knowledge, income, media, availability of choice, family experience.

Candidates should be aware of the impact of illness on appetite, feeding, need for help, time for eating and they should be taught the importance of taking this into consideration when planning and administering a diet to a service user. It is important that candidates are aware of the fact **that normally food/diet must be negotiated if physically possible with the specific service user**. In this exercise the candidates are suggesting an appropriate menu which would form the basis for discussion with the service user. It is a good strategy to allow the candidate to have alternatives for each of the meals.

They must plan a menu to include dietary requirements for a hypothetical service user recovering from an acute illness or living with a chronic condition. The candidate should be free to identify any hypothetical service user from within any care setting, eg: the child/adult with diabetes, a service user diagnosed with cystic fibrosis, the service user recovering from prolonged diarrhoea and vomiting.

GUIDANCE ON LEARNING AND TEACHING APPROACHES FOR THIS UNIT

It is important that a supportive learning environment is created and that in delivering this Unit, there should be a balance between teacher/lecturer presentation and candidate centred learning. It is important that candidates not only understand the concepts which are identified in this Unit but that they can apply them to given situations as well.

The content of this Unit can be taught using a variety of methods such as:

- ◆ Small group exercises
- ◆ Lecturer guided research
- ◆ Group discussion
- ◆ Student presentations
- ◆ Case studies
- ◆ Worksheets
- ◆ Individual or group research
- ◆ Videos
- ◆ Lectures
- ◆ Use of information and communication technology (ICT) such as appropriate and relevant websites

The Scottish Dietary Targets and current nutritional guidelines could be presented by the tutor. Candidates should be encouraged to explore the range of foods available, the nutritional value of foods and the importance of presenting a nutritional diet that is both interesting and enjoyable.

National Unit Specification: support notes (cont)

UNIT Healthy Eating in a Care Setting (Intermediate 2)

It is important that candidates link the concepts of a balanced diet to the factors which influence dietary choices. This could be approached by candidates selecting individual service users, investigating the relevant influencing factors and presenting their findings to the class group.

Candidates should be encouraged to use relevant resources: helpful internet sites include NHS Health Scotland and The Scottish Office.

As Outcome 2 focuses on purchasing, storing and preparing food it is essential that candidates are aware of current national guidelines, which may be delivered by tutor exposition followed by lecturer guided research. Relevant information can be gathered from The Health and Safety Executive and The Food Standards Agency. There are also many interactive quizzes available online that could be used by candidates to test their knowledge.

Outcome 3 and 4 needs the teacher /lecturer to meet with each candidate and discuss the choice and approach to the investigation for their folio and a follow up when they have submitted their work.

GUIDANCE ON APPROACHES TO ASSESSMENT FOR THIS UNIT

The Evidence Requirements and the appendix both provide specific requirements for Unit assessment. They set out clearly what must be addressed by candidates and what evidence teachers/lecturers should look for.

Outcomes 1 and 2

An appropriate instrument of assessment for Outcomes 1 and 2 would be a single closed-book test which contains a range of structured short answer, and restricted response-type questions.

Evidence should be gathered by means of a single holistic event towards the end of the Unit. Care should be taken to ensure that sufficient time is allowed for remediation and reassessment, if required.

If re-assessment is required, it should sample across a different range of mandatory content.

Outcome 3 and 4

An appropriate instrument of assessment for Outcome 3 and 4 would be a folio containing a report and a one day menu. This is for a service user recovering from an acute illness or from one who lives with a chronic condition. They should detail the reasons for their recommendations within the day's diet. Candidates should include in the report an explanation for the choices and the ways in which the care worker can support the service user's needs in the physical eating process.

The candidate should be free to identify any **theoretical service user** from within any care setting, for example: the child/adult with diabetes, a service user diagnosed with cystic fibrosis, the service user recovering from prolonged diarrhoea and vomiting.

The NABs illustrate the national standard requirements for the Unit. NAB materials provide assessment instruments and guidance on implementation.

National Unit Specification: support notes (cont)

UNIT Healthy Eating in a Care Setting (Intermediate 2)

CANDIDATES WITH DISABILITIES AND/OR ADDITIONAL SUPPORT NEEDS

The additional support needs of individual candidates should be taken into account when planning learning experiences, selecting assessment instruments, or considering alternative Outcomes for Units. Further advice can be found in the SQA document *Guidance on Assessment Arrangements for Candidates with Disabilities and/or Additional Support Needs* (www.sqa.org.uk).

National Unit Specification: appendix to the statement of standards

UNIT Healthy Eating in a Care Setting (Intermediate 2)

NB This appendix forms part of the statement of standards, ie requirements that are mandatory

Outcome 1

- ◆ Explanation of what is meant by a balanced diet and how it helps our health and wellbeing.
- ◆ The main food groups: bread, other cereals and potatoes, fruit and vegetables, milk and dairy products, high-protein foods, fats and oils and sugars.
- ◆ Fibre and water as essential to the diet for health and wellbeing.
- ◆ The current Scottish Executive guidelines on nutrition and diet.
- ◆ Essential nutrients: carbohydrates, proteins, fats, minerals, vitamins, fibre and water.
- ◆ Where essential nutrients are found in relation to food groups.

Outcome 2

- ◆ Main considerations when purchasing food: the importance of reading labels, noting nutritional content, noting use by dates, best before dates, storage requirements and cooking requirements.
- ◆ Methods of food storage.
- ◆ Food hygiene and the problem of food poisoning in food preparation.
- ◆ Current good hygiene practices and the law controlling this.
- ◆ Importance of preventing food poisoning in care settings.

Outcome 3 and 4

- ◆ Factors affecting dietary choice: age/stage of development, culture/religion, medical conditions, knowledge, income, media, availability of choice, family experience.
- ◆ Factors affecting the diet of individual service users with acute or chronic conditions.
- ◆ Ways of planning menus.
- ◆ Responsibility of care workers in supporting the service user in making dietary choices and in the eating process.



National Unit Specification: general information

UNIT Maintaining Safety in a Care Setting (Intermediate 2)

CODE F1P2 11

COURSE Health and Safety in a Care Setting (Intermediate 2)

SUMMARY

This is a mandatory Unit in the *Health and Safety in a Care Setting (Intermediate 2)* Course but it can also be taken as a free-standing Unit.

The Unit is designed to help candidates understand the importance of maintaining the safety of service users, staff and visitors in the care setting, by gaining knowledge of relevant health and safety legislation, policy guidelines, risk assessment and the levels of responsibility of individuals.

The Unit is suitable for candidates who wish to gain employment at support worker level in the Health and Social Care sectors. It is also suitable for those who wish to progress to further study at a Further Education College or Higher Education Institution.

OUTCOMES

- 1 Explain how specific legislation is used in maintaining safety in a variety of care settings.
- 2 Describe health and safety responsibilities within specific care settings.
- 3 Carry out a risk assessment relevant to maintaining the safety of service users, staff and others in a specific care setting.

RECOMMENDED ENTRY

While entry is at the discretion of the Centre, candidates would benefit from having attained one of the following, or equivalent:

- ◆ Care (Intermediate 1) Course or Units
- ◆ Early Education and Childcare (Intermediate 1) Course or Units
- ◆ Standard Grade in a social subject at General level
- ◆ Standard Grade Social and Vocational Skills at General level
- ◆ Standard Grade in a science subject at General level

Administrative Information

Superclass: PL

Publication date: June 2007

Source: Scottish Qualifications Authority

Version: 01

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National Unit Specification: general information (cont)

UNIT Maintaining Safety in a Care Setting (Intermediate 2)

CREDIT VALUE

1 credit at Intermediate 2 (6 SCQF credit points at SCQF level 5*)

**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 is no automatic certification of Core Skills or Core Skills components in this Unit.

National Unit Specification: statement of standards

UNIT Maintaining Safety in a Care Setting (Intermediate 2)

Acceptable performance in this Unit will be the satisfactory achievement of the standards set out in this part of the Unit Specification. All sections of the statement of standards are mandatory and cannot be altered without reference to the Scottish Qualifications Authority.

OUTCOME 1

Explain how specific legislation is used to maintain safety in a variety of care settings.

Performance Criteria

- (a) Describe the risks and hazards associated with different care settings.
- (b) Describe the specific legislation which applies to these risks and hazards.
- (c) Explain the ways in which care providers maintain safety in a care setting in order to meet the legislative requirements.

OUTCOME 2

Describe health and safety responsibilities within specific care settings.

Performance Criteria

- (a) Describe the responsibilities that service users have in respect of their own safety and that of others in a care setting.
- (b) Describe factors that may affect this responsibility.
- (c) Describe the responsibilities placed on staff in maintaining the safety of themselves, service users and visitors in a care setting.
- (d) Describe the responsibility of visitors for maintaining safety in a care setting.

OUTCOME 3

Carry out a risk assessment relevant to maintaining the safety of service users, staff and others in a specific care setting.

Performance Criteria

- (a) Describe potential hazards within a specific care setting.
- (b) Describe the risks associated with these hazards.
- (c) Describe risk reduction strategies to maintain safety.

National Unit Specification: statement of standards (cont)

UNIT Maintaining Safety in a Care Setting (Intermediate 2)

EVIDENCE REQUIREMENTS FOR THIS UNIT

The mandatory content for this Unit can be found in the appendix at the end of the Unit specification

Outcomes 1 and 2

Written and/or oral evidence is required which demonstrates that the candidate has achieved Outcomes 1 and 2 to the standard specified in the Outcomes and Performance Criteria. The evidence for these Outcomes should be obtained under controlled supervised conditions. The assessment should be closed-book and should last no more than 40 minutes.

As candidates will increase their knowledge, understanding and skills throughout their study, assessment should take place towards the end of the Unit. The use of a cut-off score may be appropriate for this assessment.

Each assessment should sample across the mandatory content of the Unit and contain questions which require candidates to generate evidence in relation to:

- ◆ **four** different risks associated with each of **two** different care settings
- ◆ the specific legislation which applies to the identified risks
- ◆ **three** ways that a care provider maintains safety in a care setting
- ◆ **three** responsibilities that service users have in respect of their own safety and that of others in a specific care setting
- ◆ **two** factors that may affect the responsibility of the service user
- ◆ **three** responsibilities that staff have in respect of their own safety and that of service users and visitors in a specific care setting
- ◆ **two** responsibilities that visitors have in order to maintain safety in the care setting

The standard to be applied, the breadth of coverage and an appropriate cut-off score are illustrated in the National Assessment Bank (NAB) pack available for this Unit. If a centre wishes to design its own assessments they should be of a comparable standard.

Outcome 3

Written and/or oral evidence is required for this Outcome. Candidates will be given a risk assessment form template and complete this under supervision at an appropriate point in the Unit. Each candidate will produce **one** risk assessment from a given scenario.

The standard to be applied is illustrated in the National Assessment Bank (NAB) pack available for this Unit. If a centre wishes to design its own assessments they should be of a comparable standard.

National Unit Specification: support notes

UNIT Maintaining Safety in a Care Setting (Intermediate 2)

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 40 hours.

GUIDANCE ON THE CONTENT AND CONTEXT FOR THIS UNIT

The mandatory content for this Unit can be found in the appendix at the end of the Unit specification

This is a mandatory Unit in the *Health and Safety in Care Settings (Intermediate 2)* Course but can also be taken as a free-standing Unit. It is also an optional Unit in the *National Certificate in Health and Social Care (Higher)*.

Outcome 1

A range of formal and informal care settings should be identified, highlighting possible barriers to maintaining safety that care providers may experience when care is not provided in the care provider's own premises.

Relevant legislation relating to safety should be identified to include:

- ◆ The Health and Safety at Work Act 1974
- ◆ Manual Handling Operations Regulations 1992
- ◆ Management of Health and Safety at Work Regulations 1999
- ◆ Control of Substances Hazardous to Health Regulations 2002
- ◆ Fire (Scotland) Act 2005
- ◆ Electrical Safety Regulations.1989
- ◆ Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDOR) 1995

It should be remembered that legislation can be amended and new legislation introduced which replaces or adds to current legislation. The most updated version should be used for reference.

It is expected that candidates will be familiar with the Health and Safety at Work Act (1974). This will include responsibilities of employer, employees and others and will be used in Outcomes 1 and 2. Candidates should have general knowledge of what is covered in the remaining acts and how they are used to meet safety issues. At this level it is expected that candidates will be able to find their way through the regulations to enable them to use them if required at their future workplace. Identification of the responsibilities of the care provider should be clear in relation to compliance with health and safety legislation and in maintaining registration with the Scottish Commission for the Regulation of Care (SCRC).

Outcome 2

The candidate should be able to demonstrate knowledge of the varying levels of responsibility expected of the service user which would take into consideration a number of factors such as age, comprehension, physical or learning disability.

National Unit Specification: support notes (cont)

UNIT Maintaining Safety in a Care Setting (Intermediate 2)

A child in a nursery would not be expected to have the same degree of responsibility for the safety of themselves and visitors as would be expected of a healthy adult in, for example, sheltered housing.

It is important for candidates to understand that all staff have a legal responsibility and a duty of care to maintain the safety of service users, colleagues and visitors. Policy guidelines should state the degree of responsibility and accountability within the care setting for staff working in care posts.

Visitors could include volunteers, parent helpers, relatives and tradespersons. Although not directly employed within the care setting, visitors should be made aware of the policy guidelines and have a responsibility to comply in order to maintain safety.

Outcome 3

The description of potential hazards will vary to some extent depending on the type of care setting being considered. Hazards could include spillages, faulty equipment, obstacles, fire doors wedged open, scald and burn risk from water, cookers and heaters, lack of moving and handling equipment and intruders in premises.

When a clear understanding of the potential hazard has been established the candidate should then describe the risks associated with the hazard and describe an appropriate strategy to reduce or eliminate the risk. An example of a hazard could be an open front door in a nursery. An example of a risk associated with the hazard could be that an intruder could gain access to young vulnerable children. The risk reduction strategy could be to have a self closing security door with restricted access.

GUIDANCE ON LEARNING AND TEACHING APPROACHES FOR THIS UNIT

It is important that a supportive learning environment is created and that in delivering this Unit, there should be a balance between teacher/lecturer presentation and candidate centred learning. It is important that candidates not only understand the concepts which are identified in this Unit but that they can apply them to given situations as well.

The content of this Unit can be taught using a variety of methods such as:

- ◆ Small group exercises
- ◆ Group discussion
- ◆ Case studies
- ◆ Simulated exercises
- ◆ Worksheets
- ◆ Individual or group research
- ◆ Videos
- ◆ Lectures
- ◆ Use of information and communication technology (ICT) such as appropriate and relevant websites

The Unit can be delivered using a variety of methods and where appropriate candidates can be encouraged to draw on their own experience and observations within the care setting.

National Unit Specification: support notes (cont)

UNIT Maintaining Safety in a Care Setting (Intermediate 2)

Candidates could carry out an internet search for relevant health and safety information.

Use could be made of thought showers, group discussion, simulation exercises and visits to care settings.

To facilitate an understanding of risk assessment, hazards could be identified within the teaching establishment. Candidates could then work in groups to discuss the associated risks and devise a risk reduction strategy.

GUIDANCE ON APPROACHES TO ASSESSMENT FOR THIS UNIT

The Evidence Requirements and the appendix both provide specific requirements for Unit assessment. They set out clearly what must be addressed by candidates and what evidence assessors should look for.

An appropriate instrument of assessment for **Outcome 1 and 2** would be a single closed-book test which contains a range of structured short answer, and restricted response-type questions. The test should make use of stimulus case study type material as a tool to help candidates focus on the question(s) posed. The test should last no longer than 40 minutes.

Sampling of content is acceptable and should be adopted as good practice. Evidence Requirements detail the extent of sampling involved and the NABs illustrate this.

Evidence should be gathered by means of a single holistic event towards the end of the Unit. Care should be taken to ensure that sufficient time is allowed for remediation and reassessment, if required.

If re-assessment is required, it should sample across a different range of mandatory content.

An appropriate instrument of assessment for **Outcome 3** will be a risk assessment on a case study. This will be a supervised open-book assessment using a supplied risk assessment form and a case study. The case study will be supplied at the time of the supervised assessment.

If reassessment is required another case study should be used.

The NABs illustrate the national standard requirements for the Unit. NAB materials provide assessment instruments and guidance on implementation. The questions in the NAB are short answer, and restricted response.

CANDIDATES WITH DISABILITIES AND/OR ADDITIONAL SUPPORT NEEDS

The additional support needs of individual candidates should be taken into account when planning learning experiences, selecting assessment instruments, or considering alternative Outcomes for Units. Further advice can be found in the SQA document *Guidance on Assessment Arrangements for Candidates with Disabilities and/or Additional Support Needs* (www.sqa.org.uk).

National Unit Specification: appendix to the statement of standards

UNIT Maintaining Safety in a Care Setting (Intermediate 2)

NB This appendix forms part of the statement of standards, ie requirements that are mandatory

Outcome 1

A range of formal and informal care settings.

Relevant legislation relating to safety in care settings should be identified to include outline knowledge in order to use the information covered in the acts in dealing with safety issues. More detailed knowledge of the Health and Safety at Work Act (1974) is required for both Outcomes 1 and 2.

The Acts that must be covered are:

- ◆ The Health and Safety at Work Act 1974
- ◆ Manual Handling Operations Regulations 1992
- ◆ Management of Health and Safety at Work Regulations 1999
- ◆ Control of Substances Hazardous to Health Regulations 2002
- ◆ Fire (Scotland) Act 2005
- ◆ Electrical Safety Regulations.1989
- ◆ Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDOR) 1995

It should be remembered that legislation can be amended and/or replaced by new or have supplementary legislation appended. Versions that are current should always be used.

Candidates will cover:

- ◆ Risks and hazards appropriate to specified care setting.
- ◆ Ways in which care providers maintain safety in their care environments.

Outcome 2

Candidates will cover:

- ◆ Individuals' responsibilities as defined in legislation (Health and Safety Act 1974).
- ◆ Individuals' responsibilities as service users, staff and visitors in care settings.

Outcome 3

Candidates will cover:

- ◆ How to perform a risk assessment.
- ◆ Hazard and risk spotting.
- ◆ How to relate risks to hazards.
- ◆ How to relate risks and hazards to care settings and types of service users.
- ◆ Risk reduction strategies related to care settings.