

# Qualification Unit

This unit forms part of a regulated qualification.

**Unit Title:** Work in a Person-Centred Way

**Unit Reference Number:** M/651/0281

**Level:** Two (2)

**Credit Value:** Three (3)

**Minimum Guided Learning Hours:** 27

Learning Outcome (The Learner will):	Assessment Criterion (The Learner can):
1. Understand person-centred values	1.1 Identify <b>person-centred values</b>
	1.2 Explain how to <b>put person-centred values</b> into practice in your day-to-day work
	1.3 Describe why it is important to work in a way that promotes <b>person-centred values</b> when providing support to <b>individuals</b>
	1.4 Identify ways to promote dignity in your day-to-day work
	1.5 Describe the importance of <b>relationships</b> significant to the <b>individual</b> being supported when working in a person-centred way
2. Understand working in a person-centred way	2.1 Explain the importance of finding out the history, preferences, wishes and needs of the <b>individual</b>
	2.2 Describe why the changing needs of an <b>individual</b> must be reflected in their care and/or <b>support plan</b>
	2.3 Describe the importance of supporting <b>individuals</b> to plan for their future <b>wellbeing</b> and fulfilment, including <b>end of life care</b>
3. Understand the meaning of mental capacity when providing person-centred care	3.1 Identify relevant <b>legislation</b> and <b>codes of practice</b> relating to mental <b>capacity</b>
	3.2 Explain what is meant by the term <b>“capacity”</b>

	3.3 Explain why it is important to assume that an <b>individual</b> has <b>capacity</b> unless there is evidence that they do not
	3.4 Outline what is meant by “consent,” and factors that influence an <b>individual’s</b> mental <b>capacity</b> and ability to express consent
	3.5 Describe situations where an assessment of <b>capacity</b> might need to be undertaken and the meaning and significance of best interest decisions or <b>advance statements</b> regarding future care which the <b>individual</b> has already made
4. Be able to support the individual to be comfortable and make changes to address factors that may be causing pain, discomfort, or emotional distress	4.1 Ensure that where <b>individuals</b> have restricted movement or mobility that they are comfortable
	4.2 Recognise the <b>signs</b> that an <b>individual</b> is in pain, discomfort, or <b>emotional distress</b>
	4.3 <b>Take appropriate steps</b> to remove or minimise factors which may be causing pain, discomfort, or <b>emotional distress</b> to the <b>individual</b>
	4.4 Raise any concerns directly and appropriately with <b>others</b> concerned and <b>report</b> any concerns you have following <b>agreed ways of working</b>
5. Support the individual to maintain their identity, self-esteem, spiritual wellbeing and overall wellbeing	5.1 Describe how <b>individual</b> identity and self-esteem are linked to emotional, spiritual wellbeing, and overall <b>wellbeing</b>
	5.2 Demonstrate that own attitudes and behaviours promote emotional, spiritual wellbeing, and overall <b>wellbeing</b> of the <b>individual</b>
	5.3 Support and encourage <b>individual’s</b> own sense of identity and self-esteem
	5.4 <b>Report</b> any concerns about the <b>individual’s</b> emotional, spiritual wellbeing and overall <b>wellbeing</b> to the appropriate person
6. Support the individual using person-centred values	6.1 Demonstrate a range of actions which promote <b>person centred values</b>

## Indicative Content

### LO1 Person-centred Values:

- individuality
- independence
- privacy
- partnership

- choice
- dignity
- respect
- rights

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

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

LO2 **Individual and Individuals:** A person accessing care and support. The individual, or individuals, will normally refer to the person or people the learner is providing care and support for.

**Wellbeing:** Is a broad concept referring to the person's quality of life. It considers health, happiness, and comfort. It may include aspects of social, emotional, cultural, mental, intellectual, economic, physical, and spiritual well-being.

**Criteria 2.3:** In reference to planning for End of Life Care, everyone should have the opportunity to develop an Advance Care Plan, this helps people to have a good end of life experience by ensuring their wishes and respecting the person's treatment and support preferences are known and can be supported. The Advance Care Plan should be reviewed regularly. The plan may include a Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) decision which means the person does not want cardiopulmonary resuscitation (CPR) if their heart or breathing stops. This does not mean the withdrawal of all treatment. Part of this plan may also include a Recommended Summary Plan for Emergency Care and Treatment (ReSPECT) form which records an individual's wishes about a range of health care and treatments.

LO3 **Individual and Individuals:** A person accessing care and support. The individual, or individuals, will normally refer to the person or people the learner is providing care and support for.

**Legislation and codes of practice:** As a minimum:

- Mental Capacity Act 2005/Liberty Protection Safeguards.

**Capacity:** Means the ability to use and understand information to make a decision, at the time a decision needs to be made. Advance statements: As per the individuals Advance Care Plan if they have chosen to have one in place.

LO4 **Individual and Individuals:** A person accessing care and support. The individual, or individuals, will normally refer to the person or people the learner is providing care and support for.

**Signs:** Could include but is not limited to: verbal reporting from the individual, nonverbal communication and changes in behaviour.

**Emotional distress:** Could include a range of negative feelings being displayed by the individual such as sadness, anxiety, fear anger or despair.

**Take appropriate steps:** Could include but is not limited to removing, or minimising any environmental factors causing the pain, discomfort, or emotional distress such as:

- following the plan of care e.g., Re-positioning or giving prescribed pain relief medication
- reporting to a more senior member of staff
- ensuring equipment or medical devices are working or in the correct position e.g., wheelchairs, prosthetics, catheter tubes
- seeking additional advice when needed

- providing emotional support and reassurance to the individual
- adjusting lighting, volume/noise and temperature
- removing unpleasant odours
- minimising disruption by others
- providing a private/quiet space and other reasonable adjustment.

**Others:** In this context others mean the person who may be causing discomfort or distress to the individual.

**Report:** This could include appropriate reporting systems such as written/electronic records and opportunities to share information appropriately such as within handover and team meetings. This may include reporting to a senior member of staff or family member/carer.

**Agreed ways of working:** These will include policies and procedures, job descriptions and less formal agreements and expected practices.

LO5 **Wellbeing:** Is a broad concept referring to the person's quality of life. It considers health, happiness, and comfort. It may include aspects of social, emotional, cultural, mental, intellectual, economic, physical, and spiritual well-being.

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

**Report:** This could include appropriate reporting systems such as written/electronic records and opportunities to share information appropriately such as within handover and team meetings. This may include reporting to a senior member of staff or family member/carer.

LO6 **Person-centred Values:**

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## Assessment Guidance

Assessment decisions for skills-based learning outcomes must be made during the learner's normal work activity. Skills-based assessment must include direct observation as the main source of evidence and must be carried out over an appropriate period of time.

**Criteria 4.1, 4.2, 4.3 and 4.4** requires the learner to provide performance evidence however the opportunity to do this may not arise during the period of the qualification. Direct observation is the preferred main source of evidence, however other evidence to show that the learner would be able to do this if real work evidence is not available is permissible.

Any knowledge evidence integral to skills-based learning outcomes may be generated outside of the work environment, but the final assessment decision must show application of knowledge within the real work environment.