

Health and Social Care Levels 2, 3 & 4 NVQs 2008/2009

England, Ireland, Scotland and Wales

REPORT FOR PUBLICATION

1. The qualifications and standards

Good practice seen in centres during the year and identified by external verifiers included:

- an holistic approach to assessment
- tape recording of witness testimonies
- tape recording oral questions and answers
- good use of professional discussion, particularly for levels 3 & 4
- provision of resources e.g. recorders (digital and analogue)
- signposting evidence to the workplace to improve progression
- use of environmental portfolios/eNVQ packages
- improved recording of standardisation activity

External verifiers have used the electronic report to good effect, to highlight areas where centres are non-compliant with the criteria in the NVQ Code of Practice, and to recommend where practice can be improved. Where applicable, verifiers commented on good practice as an encouragement to centres to continually evaluate and improve their own processes.

Assessment Team:	<p>Findings:</p> <p>Assessors and internal verifiers are in the main occupationally competent and knowledgeable. Where there were issues in relation to competence this was raised with the centre and measures taken to rectify the situation. This has sometimes resulted in the removal of the assessor/verifier in question from certain qualifications or the arrangement of specific activities to ensure currency of competence. Such activities included shadowing other colleagues in the workplace or undertaking additional training and development.</p> <p>The recording of CPD varied in terms of the amount of detail that was provided. Centres were encouraged to provide sufficient detail and to demonstrate how CPD would be applied to work practice.</p>
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<p>Resources:</p>	<p>Findings: In the main centres are well resourced in terms of assessment staff. Centres were sometimes unclear about what constitutes an acceptable assessor/candidate ratio when determining the workload of the assessment team. External verifiers provided guidance on this matter, and the factors to be considered, such as the experience of the assessor, whether they are qualified, the location of the assessor, the level of the qualification concerned.</p> <p>Centres use a variety of resources to support learners with the subject content of the qualification. Increasingly on-line resources are used effectively to support learners.</p> <p>In addition to this, the use of electronic recording devices for assessment purposes is on the increase, for example use of recorders, audio facilities on digital cameras and MP3 players.</p>
<p>Candidate Support:</p>	<p>Findings: Candidates were generally positive about the support they received from centres. Where issues regarding support for candidates were identified by the verifiers, remedial action was recommended, such as the completion of a more robust induction or additional meetings with candidates in order to review progress.</p> <p>Candidates clearly benefit from the increasing use of on- line resources.</p>
<p>Assessment and Verification:</p>	<p>Findings: Issues were frequently identified in relation to internal verification planning, and the recording of internal verification activity.</p> <p>External verifiers reported that the quality of feedback given to assessors by their internal verifier varied considerably, ranging from brief comments to detailed and constructive comments based around the assessment decisions made by the assessor.</p> <p>The majority of centres now understand the need for standardisation activity; however, the recording of this could often be improved. Often centres carry out meetings but these are in reality business meetings and not true opportunities for standardisation. Good practice examples around standardisation included the generation of actual activities, the recording of a range of responses to this activity and then retaining these for reference.</p>
<p>Management Systems and Records:</p>	<p>Findings: A common issue has been the lack on the part of centres to provide the required information to the external verifier prior to the visit; thus making it difficult for the verifier to select a representative sample of work to check. On occasions</p>

	<p>requested portfolios have not been available at the time of the visit.</p> <p>Centre records were sometimes incomplete or not current which resulted in an action point for the centre.</p> <p>Interchange was used effectively by many centres and, where support was needed, this was provided by the external verifier team or OCR staff.</p>
Assessment Summary:	<p>Findings:</p> <p>Action points were frequently related to the occupational competence of assessment staff and whether this was appropriate to assess or verify particular levels and units.</p>

2. Sector Developments

The profile of the workforce as well as the population it serves is changing. The development of the personalisation agenda means that services are increasingly structured to meet the needs of people who use services, from the individual who employs their own workers to multi-national employers.

There is an increasing demand in the sector for skills to work in complex areas of care, such as with those with dementia, learning difficulties, physical difficulties and those with limited life expectancy. Increasingly there is also a need to provide personalised care and support for self care to enable service users to live in their own homes.

The national occupational standards which underpin the NVQs in Health and Social Care have been subject to incremental change over the past year. This has been done to ensure that the standards continue to reflect the changing needs of the workforce and changing patterns of service in the sector.

In light of the imminent launch of the new framework of qualifications, the Qualifications and Credit Framework (QCF), it was decided not to update the existing NVQs in Health and Social Care during the past year, but to use the updated national occupational standards to underpin the development of the new QCF Diplomas in Health and Social Care and the new Level 3 Children's Workforce Diploma which will be launched in September 2010 and which will replace the existing NVQs in Health and Social Care.

The QCF diplomas will build on the features of the existing NVQs, for example the new qualifications will assess competence in a work role, they will be used for regulation and registration purposes; they will cover broadly the same content as the NVQs. Additionally, though, the new qualifications will have increased flexibility, with opportunities to show competence in particular specialisms and allow learners to combine units in a way that reflect particular job roles and interests.

The introduction of the Society, Health and Development Diploma has provided a link to schools based qualifications as a way to attract young people into the workforce to ensure a sustainable sector for the future. This qualification, while not a direct preparation for an occupation in the sector, develops those broader skills desired by employers.