

Unit Title:	Contribute to the care of a deceased person
Unit sector reference:	HSC 2022
Level:	Two
Credit value:	3
Guided learning hours:	24
Unit expiry date:	30/04/2015
Unit accreditation number:	R/601/8256

Unit purpose and aim

This unit is aimed at those working in a wide range of settings. It provides the learner with the knowledge and skills required to contribute to the care, preparation and transfer of the deceased individual and provide immediate support to those affected by the death.

Learning Outcomes	Assessment Criteria	Exemplification
<p>The learner will:</p> <p>1 Know the factors that affect how individuals are cared for after death</p>	<p>The learner can:</p> <p>1.1 Outline legal requirements and agreed ways of working that underpin the care of deceased individuals</p> <p>1.2 Describe how beliefs and religious and cultural factors affect how deceased individuals are cared for</p> <p>1.3 Identify the physical changes that take place after death and how this may affect laying out and moving individuals</p> <p>1.4 Identify diseases and conditions that necessitate specialist treatment or precautions when caring for and transferring deceased individuals</p> <p>1.5 Describe the precautions needed when undertaking the care and transfer of deceased individuals with specific high risk diseases and conditions</p>	<p>Agreed ways of working will include policies and procedures where these exist.</p>

Learning Outcomes	Assessment Criteria	Exemplification
<p>2 Be able to contribute to supporting those who are close to deceased individuals</p>	<p>2.1 Describe the likely immediate impact of an individual's death on others who are close to the deceased individual</p> <p>2.2 Support others immediately following the death of the individual in ways that:</p> <ul style="list-style-type: none"> • reduce their distress • respect the deceased individual 	<p>Others may include:</p> <ul style="list-style-type: none"> • Family • Friends • Own colleagues • Others who were involved in the life of the individual
<p>3 Be able to contribute to preparing deceased individuals prior to transfer</p>	<p>3.1 Follow agreed ways of working to ensure that the deceased person is correctly identified</p> <p>3.2 Carry out agreed role in preparing the deceased individual in a manner that respects their dignity, beliefs and culture</p> <p>3.3 Use protective clothing to minimise the risk of infection during preparation of the deceased individual</p> <p>3.4 Contribute to recording any property and valuables that are to remain with the deceased individual</p>	
<p>4 Be able to contribute to transferring deceased individuals</p>	<p>4.1 Carry out agreed role in contacting appropriate organisations</p> <p>4.2 Carry out agreed role in transferring the deceased individual in line with agreed ways of working and any wishes expressed by the individual</p> <p>4.3 Record details of the care and transfer of the deceased person in line with agreed ways of working</p>	<p>Appropriate organisations may include:</p> <ul style="list-style-type: none"> • Mortuary • Funeral directors • Places of worship
<p>5 Be able to manage own feelings in relation to the death of individuals</p>	<p>5.1 Identify ways to manage own feelings in relation to an individual's death</p> <p>5.2 Utilise support systems to deal with own feelings in relation to an individual's death</p>	

Assessment

This unit needs to be assessed in line with the Skills for Care and Development QCF Assessment principles.

This unit is competence based. This means that it is linked to the candidate's ability to competently perform a range of tasks connected with their work. This unit may be assessed using any method, or combination of methods, which clearly demonstrates that the learning outcomes and assessment criteria have been met. This unit requires workplace assessment of occupational competence.

Assessment decisions for competence based learning outcomes (eg those beginning with 'Be able to') must be made in a real work environment by an occupationally competent assessor. Any knowledge evidence integral to these learning outcomes may be generated outside of the work environment but the final assessment decision must be within the real work environment.

Competence based assessment must include direct observation as the main source of evidence.

For this unit, learning outcomes 2, 3, 4 and 5 must be assessed in a real work environment.

Guidance on assessment and evidence requirements

OCR does not stipulate the mode of delivery for the teaching of the content of this unit. Centres are free to deliver this unit using any mode of delivery that meets the needs of their candidates. Centres should consider the candidates' complete learning experience when designing learning programmes.

National occupational standards (NOS) mapping/signposting

This unit has been developed by Skills for Care and Development in Partnership with Awarding Organisations. It is directly relevant to the needs of employers and relates to national occupational standards developed by Skills for Care and Development.

As such, the unit may provide evidence for the following national occupational standards in health and social care developed by Skills for Care and Development:

HSC239

NOS can be viewed on the relevant Sector Skills Council's website or the Occupational standards directory at www.ukstandards.co.uk

Functional skills signposting

This section indicates where candidates may have an opportunity to develop their functional skills.

Functional Skills standards can be viewed at <http://www.qcda.gov.uk/15565.aspx>

Functional Skills Standards					
English		Mathematics		ICT	
Speaking and Listening	✓	Representing		Use ICT systems	✓
Reading	✓	Analysing		Find and select information	
Writing	✓	Interpreting		Develop, present and communicate information	

Additional information

For further information regarding administration for this qualification, please refer to the OCR document '*Administrative Guide for Vocational Qualifications*' (A850).

This unit is a shared unit. It is located within the subject/sector classification system 01.3 Health and Social Care.