HEALTH AND SOCIAL CARE

EXEMPLAR CANDIDATE WORK

UNIT HSC 024

PRINCIPLES OF SAFEGUARDING AND PROTECTION IN HEALTH AND SOCIAL CARE
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INTRODUCTION

OCR has reproduced this exemplar candidate evidence to support teachers in interpreting the assessment criteria for the unit HSC 024, Principles of safeguarding and protection in health and social care.

This exemplar evidence should be considered alongside the unit requirements, the Learning Outcomes and Assessment Criteria. This content has been selected by the OCR Chief External Verifier for the Health and Social Care Diplomas, to illustrate how the assessment criteria are applied, and to provide some commentary on what factors contributed to the final outcome.

The exemplar candidate evidence is intended to demonstrate how criteria have been met and are supported by a commentary. While the exemplars are intended to be useful in interpreting the specification’s Assessment Criteria, they should in no way be regarded as definitive evidence.

This resource is provided for advice and guidance only.
EXEMPLAR UNIT: HSC 024 – PRINCIPLES OF SAFEGUARDING AND PROTECTION IN HEALTH AND SOCIAL CARE

UNIT PURPOSE

• Raises awareness of how to recognise signs of abuse
• Raises awareness of how to respond to suspected or alleged abuse
• Introduces national policies and local systems of safeguarding
• Introduces ways to reduce the likelihood of abuse
• Raises awareness of how to recognise and report unsafe practices
EVIDENCE FOR LEARNING OUTCOME 1

KNOW HOW TO RECOGNISE SIGNS OF ABUSE

Assessment Criteria:
AC1.1 – **Define** the following types of abuse:
- Physical abuse
- Sexual abuse
- Emotional/psychological abuse
- Financial abuse
- Institutional abuse
- Self-neglect
- Neglect by others

AC 1.2 - **Identify** the signs and/or symptoms associated with each type of abuse

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**Extract from Assignment:**

Assignment: ‘Define the following seven types of abuse and for each include their associated signs and symptoms: ‘physical, sexual, emotional/psychological, financial, institutional, self-neglect and neglect by others.’

**Response:**

‘1) Physical abuse is deliberate physical force that may result in bodily injury, pain, or impairment. Both old and young people can be physically abused. There are signs or indicators to show physical abuse and there are ways in which victims and abusers act or interact with each other.

Physical abuse includes the smashing of furniture and personal belongings, being pushed or shoved, being held against your will, slapped, bitten, kicked, pinched, punched, choked or ducked under water, threatened or hurt with a weapon, threats of violence, locked in or out of the house, hair pulled … burnt with cigarettes, acid, an iron, hot food or water …

Signs of physical abuse in adults are: bruising, particularly in well-protected and covered areas, fractures, sprains or dislocations, lacerations, burns - including friction burns and scalds, drowsiness, pressure sores, cowering and flinching, unexplained hair loss, significant weight loss, etc….

Symptoms include feeling low, angry and in pain.

2) Sexual abuse is when a person is forced or tricked into taking part in any kind of sexual activity. When sexual contact is non-consensual, it is an abuse. It can happen to men and women of any age that is both old and young. It can include sexual penetration of any part of the body with a penis, finger or any object, sexual exploitation, making threats about sexual activities, exposure to pornographic material, touching of breast or genitals, kissing, etc.

Activities such as showing pornographic material, forcing the person to watch sex acts or forcing the person to undress are also considered sexual abuse.

The signs and symptoms of sexual abuse in the elderly can be bruises around breasts or genitals, genital infections, unexplained vaginal or anal bleeding, torn, stained, or bloody underwear, disturbed sleep patterns, vulnerable adult appears withdrawn and fearful, inappropriate dressing, etc…

3) Emotional Abuse is where one person gains power and control over another through words and gestures which gradually undermine the other’s self-respect… Emotional abuse can be name-calling, blaming, screaming, making threats, yelling….neglecting, manipulation, not listening, withholding affection…belittling and untrue accusations.

Signs of emotional abuse are depression, anxiety, withdrawing or refusing affection, fearful or agitation, lower self-esteem and self-confidence, shouting or swearing, behaviours such as rocking, hair twisting and self-mutilation, vulnerable adult withdrawn and fearful…"
Response continued:

4) Financial abuse is stealing or defrauding someone of money, goods and/or property, allowing others to steal money or property, tricking or threatening individuals into giving away money or property, withholding money, refusing to allow individuals to manage their finances, etc. for example when a support worker is taking money from a service users’ purse without his or her knowledge.

Signs of financial abuse are signatures on cheques that do not resemble the service users’ signature, or signed when the service user cannot write, unexplained withdrawals of large sums of money by a person accompanying the service user, lack of amenities, such as TV, personal grooming items, appropriate clothing, that the service user should be able to afford, deliberate isolation of service user from friends and family, resulting in the support worker alone having total control, the unexplained sudden transfer of assets to a family member or someone outside the family…. Symptoms include the person feeling fearful, anxious, embarrassed and belittled.

5) Institutional abuse happens when the lifestyles of service users are sacrificed in favour of the routines and/or restrictive practices of the home. Institutional abuse comprises neglect, physical abuse, sexual abuse, verbal abuse, discriminatory abuse, psychological and emotional abuse, financial abuse, service users not being allowed to go out, their personal letters are opened and read, their privacy not respected, their interest not at the centre of every decision being made, excessive medication and complaints procedure not made available for the service users.

Signs and symptoms include lack of own personal clothing and possessions, …no flexibility of bedtimes, eating times or waking times, dirty clothing or bed linen, misuse of medication, lack of care plans, lack of heating, staff entering into service users’ rooms without knocking.

6) Self-neglect is when a person does not pay attention to their health and well-being. Service users can neglect themselves due to illness or depression or might intentionally neglect themselves.

The signs and symptoms include: living in dirty conditions, poor personal hygiene, poor nutrition…not getting medical help, not being interested in the way they look, long toe nails not taking medication.

7) Neglect is when a carer does not carry out their duty of care and fails to care for a service user this can be deliberate or unintentional due to the carer being ill or stressed…

Signs and symptoms of neglect include absence of food, water, and heat… poor personal hygiene including soiled clothing, dirty nails and skin…inappropriately dressed for cold or hot weather, bedsores….constant hunger, withdrawn, illness….

COMMENTARY FOR EVIDENCE FOR ACS 1.1 AND 1.2

• **Assessment Method:** The learner has completed an assignment to explain the meaning of each of these seven types of abuse as well as their associated signs and symptoms. The learner has produced factual details that provide evidence for ACs 1.1 and 1.2. The assessment method is valid as it measures the learner’s understanding and knowledge of the definitions and signs and symptoms associated for each type of abuse.

• **Quality of Evidence:** The learner’s response is of a good quality because the learner reflects own understanding of the meaning of each type of abuse. The learner also provides a very detailed account of the signs and symptoms associated with each type of abuse and distinguishes well between signs (what can be seen) and symptoms (the way the individual feels). The information that the question extracts from the learner is more than is required to meet this AC; as the learner provides a description, where a list of the different signs and/or symptoms would have been sufficient.

• **Breadth of Evidence:** The learner has stated clearly the meaning and signs and symptoms of each type of abuse. The learner’s evidence meets AC1.1 fully in terms of providing a definition and the signs and symptoms of the following types of abuse: physical, sexual, emotional/psychological, financial, institutional, self-neglect and neglect by others.
**Assessment Criteria:**

AC1.3 - **Describe** factors that may contribute to an **individual** being more vulnerable to abuse.

### Extract from Written Questioning:

**Written Question:** ‘Describe different factors that may contribute to an individual being more vulnerable to abuse’:

**Response:**

- Living with the carer may increase the chances for abuse to occur as this may cause stress and resentment if the carer feels they cannot cope. If an individual is looked after by staff who do not have the right training, any supervision at work or support, are stressed, have personal problems or do not like working in care then this can increase the risk of an individual being abused.

- If an individual is not mobile, is confused, has dementia, or is aggressive or challenging then this can increase the risk of abuse as the carer might not know how to deal with this, get frustrated and might take it personally and abuse the individual.

- Domestic violence can also play a part as can the relationship between the individual and their parent or spouse if it was poor and involved abuse.

### COMMENTARY FOR EVIDENCE FOR AC 1.3

- **Assessment Method:** The assessor has used an open **written question** with this learner ‘Describe different factors…’; this encourages the learner to think about the different ways an individual can be more vulnerable to abuse and provides them with an opportunity to provide a more detailed response and to also provide evidence for AC1.3. The assessment method is **valid** as it measures the learner’s understanding and knowledge of the factors that may contribute to abuse.

- **Quality of Evidence:** The learner’s response is of a good quality because the learner reflects own full understanding of the different factors that may contribute to an individual being more vulnerable to abuse in terms of the social care worker, the carer, the individual including the relationship between these as well as the health and social care setting itself.

- **Breadth of Evidence:** The learner has detailed clearly the different factors that may contribute. The learner’s evidence **meets AC1.3 fully** in terms of providing a **description** of the factors that may contribute to an individual being more vulnerable to abuse.
## EVIDENCE FOR LEARNING OUTCOME 2

### KNOW HOW TO RESPOND TO SUSPECTED OR ALLEGED ABUSE

Assessment Criteria:
AC2.1 - Explain the actions to take if there are suspicions that an individual is being abused

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| ‘If I suspect abuse through noticing a sign of physical abuse or change in the behaviour of an individual, I will make sure that I ask the individual what has happened telling the individual the changes that I have noticed. If it is in my place of work and the name of the person that abused the individual is known, whether staff or another service user, I must also record and report this.

I will listen to the individual carefully; it is up to them to tell me, I would not ask them any questions about this as this is not part of my job role and would stay calm.

I will make sure that I record what the individual tells me using the individual’s own words. I will make sure that I reassure the individual and explain that their safety is the most important and that it is my duty of care to tell the manager.

I will make sure that I let my manager know what has happened immediately and pass this information on in private and make sure my report is also confidential. I will only report and record the facts - what the individual has told me. Depending on what is found out the individual might need to continue to be monitored and a plan of care will be put in place that must be followed to protect the service user.

‘I will make sure that I let my manager know and report and record this in private but if the allegation is about my manager or the manager is unwilling to do anything, I will follow my company policy of reporting abuse and report to CQC.’ |
Assessment Criteria:

AC2.2 - **Explain** the actions to take if an individual alleges that they are being abused.

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**Extract from Written Questioning:**

Written Question: ‘Explain the actions to take if an individual alleges that they are being abused:

**Response:**

‘If an individual alleges that they are being abused, I will make sure that I listen to the individual carefully to know exactly what happened. If it is in my place of work and the name of the person that abused the individual is known, whether staff or another service user, I must also record and report this.

I will make sure that I record the detail of all allegations that the individual tells me using the individual's own words; I will not ask any questions or make any judgements about what I have been told and I will stay calm. I will make sure that I record the date and time when the abuse was reported and then sign this record.

I will make sure that I take the allegations seriously and reassure the individual that they are right to tell me as their safety is the most important.

I will make sure that I let my manager know and report and record this in private but if the allegation is about my manager or the manager is unwilling to do anything, I will follow my company policy of reporting abuse and report to CQC.’

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**COMMENTARY FOR EVIDENCE FOR ACS 2.1 AND 2.2**

- **Assessment Method:** The assessor has used an open **written question** with this learner ‘Explain the actions to take…’ for each AC; this encourages the learner to think about the different actions that need to be taken when there are suspicions and allegations of abuse made. The assessment method is **valid** as it measures the learner's understanding and knowledge of how to respond to both suspicions and allegations of abuse.

- **Quality of Evidence:** The learner’s response is of a good quality because the learner reflects own full understanding of the two different sets of actions that need to be followed for suspicions and allegations of abuse including when nothing is done in response to these: ‘if the allegation is about my manager or the manager is unwilling to do anything, I will follow my company policy of reporting abuse and report to CQC.’ The learner also details own knowledge of who may be implicated in both allegations and suspicions of abuse and the actions that must be taken: ‘If it is in my place of work and the name of the person that abused the individual is known, whether staff or another service user, I must also record and report this… if the allegation is about my manager or the manager is unwilling to do anything, I will follow my company policy of reporting abuse and report to CQC.’

- **Breadth of Evidence:** The learner has detailed clearly the actions to take for both suspicions and allegations of abuse. The learner’s evidence **meets ACs 1.1 and 1.2 fully** in terms of providing an **explanation** of the actions to take if there are suspicions that an individual is being abused and if an individual alleges that they are being abused. The learner’s response can also be cross referenced to ACs 5.1 and 5.2.
Assessment Criteria:
AC2.3 - Identify ways to ensure that evidence of abuse is preserved

Extract from Written Questioning:
Written Question: ‘List different ways to ensure that evidence of abuse is preserved:

Response:
Ways to ensure that evidence of abuse is preserved are as follows:

- By leaving things as they are and not touching anything.
- By not removing, cleaning or washing what the individual is wearing and by not handling the individual’s clothes or bedding.
- By keeping the area safe and not allowing anyone to enter into the area.
- By recording and reporting carefully, confidentially and in full all that was told to me by both the individual and others if present at the time and also what I noticed; stating the facts only.
- By preserving any first aid items used.

COMMENTARY FOR EVIDENCE FOR AC 2.3

- **Assessment Method:** The assessor has used a clear **written question** with this learner ‘List different ways …’; this encourages the learner to identify different ways to ensure that evidence of abuse is preserved. The assessment method is **valid** as it measures the learner’s understanding and knowledge of the different methods of how to preserve evidence of abuse.

- **Quality of Evidence:** The learner’s response is of a good quality because the learner reflects own full understanding of the different ways of preserving evidence of abuse and includes a range of practical ways this can be done in terms of both protecting evidence physically as well as clear recording and reporting procedures.

- **Breadth of Evidence:** The learner has clearly identified the different ways of preserving evidence of abuse. The learner’s evidence meets **AC 2.3 fully** in terms of **identifying** ways to ensure that evidence of abuse is preserved.
EVIDENCE FOR LEARNING OUTCOME 3

UNDERSTAND THE NATIONAL AND LOCAL CONTEXT OF SAFEGUARDING AND PROTECTION FROM ABUSE

Assessment Criteria:
AC 3.1 - **Identify** national policies and local systems that relate to safeguarding and protection from abuse
AC 3.2 - **Explain** the roles of different agencies in safeguarding and protecting individuals from abuse

Extract from **Written Questioning:**

**Written Question:** ‘List the national policies and local systems that relate to safeguarding and protection from abuse and explain the roles of different agencies:

**Response:**


Local Systems – Safeguarding Adults Boards, Safeguarding policies and procedures for vulnerable adults.’

Safeguarding Adults Boards – these bring together a number of different local agencies that work with vulnerable adults to share information and monitor their work i.e. local agencies like the police, MIND, housing teams, advocacy groups.

The Police – their role is to safeguard vulnerable adults, investigate all reports of vulnerable adult abuse and protect and uphold the rights of vulnerable adults.

CQC – to monitor and provide guidance on what all health and social care providers must do to safeguard vulnerable adults from abuse; the safeguarding policies, procedures and systems developed are in place to prevent vulnerable adults from being abused.’

**COMMENTARY FOR EVIDENCE FOR AC 2.3**

- **Assessment Method:** The assessor has used a clear **written question** with this learner and paired together these two ACs ‘List the national policies and local systems … and explain the roles of different agencies’; this encourages the learner to identify relevant policies and systems as well as explain the role of different agencies in safeguarding and protecting individuals from abuse. The assessment method is **valid** as it measures the learner’s understanding and knowledge of national policies, local systems and the role of agencies.

- **Quality of Evidence:** The learner’s response is of a good quality because the learner reflects a full understanding of both national policies and local systems that relate to safeguarding and protection and then details the specific role of three different agencies: Safeguarding Adults Boards, The Police and the CQC in safeguarding and protecting vulnerable adults from abuse.

- **Breadth of Evidence:** The learner has clearly identified national policies and local systems and detailed the roles of different agencies in safeguarding and protecting individuals from abuse. The learner’s evidence **meets ACs 3.1 and 3.2 fully** in terms of identifying national policies and local systems that relate to safeguarding and protection from abuse and **explaining** the roles of different agencies in safeguarding and protecting vulnerable adults from abuse.
Assessment Criteria:
AC3.3 - Identify reports into serious failures to protect individuals from abuse

Extract from Written Questioning:

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<td>Response:</td>
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| 'A report about Castlebeck Care Ltd which failed to ensure that the vulnerable living at Winterbourne View were adequately protected from risk, including the risks of unsafe practices by its own staff. Individuals in Winterbourne View which is a home owned by Castlebeck Care Ltd were pinned down, slapped, doused in cold water and repeatedly taunted and teased by staff in the home. Castlebeck Care Ltd failed to notify the Care Quality Commission of these incidents, injuries to individuals and of occasions when individuals had gone missing.  
A report about the murder of Steven Hoskin, a young man with learning difficulties who was abused and murdered in July 2006. In addition to being pushed over the railway and falling from a great height, it was also found that Steven had taken paracetamol tablets, had been drinking alcohol and had sustained recent injuries from cigarette burns. In addition he suffered appalling treatment from his abusers who took over his bed sit and he had neck bruises from having been hauled around his home by his own pet's dog-lead and the backs of his hands had the marks of foot-prints.' |

COMMENTARY FOR EVIDENCE FOR AC 3.3

- **Assessment Method:** The assessor has used a clear *written question* with this learner 'List reports into serious failures to protect individuals from abuse'; this encourages the learner to identify reports into serious failures to protect individuals from abuse. The assessment method is *valid* as it measures the learner's knowledge of different reports into serious failures to protect vulnerable adults from abuse.

- **Quality of Evidence:** The learner's response is of a good quality because the learner reflects a full understanding of two different reports where there were serious failures to protect vulnerable adults from abuse. The information that the question extracts from the learner is more than is required to meet this AC; as the learner provides a description, where a list of reports into serious failures would have been sufficient.

- **Breadth of Evidence:** The learner has clearly identified reports into serious failures to protect individuals from abuse. The learner's evidence *meets AC 3.3 fully* in terms of identifying reports into serious failures to protect vulnerable adults from abuse.
**Assessment Criteria:**  
AC 3.4 - **Identify** sources of information and advice about own role in safeguarding and protecting individuals from abuse

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**Extract from Oral Questioning:**

**Oral Question:** ‘Where can you go to get information and advice about your role in safeguarding and protecting individuals from abuse?’

**Response:**

‘Local authority Adult Services Department like Social Services  
My manager, colleagues  
My company’s policies and procedures on safeguarding  
The internet  
Care Quality Commission  
Independent Safeguarding Authority  
Books  
Training and advice from training centres.’

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**COMMENTARY FOR EVIDENCE FOR AC 3.4:**

- **Assessment Method:** The assessor has used a clear **oral question** with this learner ‘Where can you go to get information and advice….; this encourages the learner to identify different sources of information and advice in safeguarding and protecting vulnerable adults. The assessment method is **valid** as it measures the learner’s knowledge of different sources of information and advice.

- **Quality of Evidence:** The learner’s response is of a good quality because the learner reflects a full understanding of the different sources of information and advice available from both own workplace and external agencies. Due to this AC being an ‘identify’ the information could also have been presented in the form of a spidergram.

- **Breadth of Evidence:** The learner has clearly identified sources of information and advice. The learner’s evidence **meets AC 3.4 fully** in terms of **identifying** sources of information and advice about own role in safeguarding and protecting individuals from abuse.
EVIDENCE FOR LEARNING OUTCOME 4

UNDERSTAND WAYS TO REDUCE THE LIKELIHOOD OF ABUSE

Assessment Criteria:
AC 4.1 - Explain how the likelihood of abuse may be reduced by:
- working with person centred values
- encouraging active participation
- promoting choice and rights

Extract 1 from Discussion:
Discussion: ‘Tell me about how working with person centred values can reduce the likelihood of abuse:
Response:
‘Person-centred values include the individuality of the person, the rights of the individual, the individual's choice, the individual's privacy, the individual's independence, the individual's dignity and the individual being respected.

If person centred values are taken into consideration when supporting an individual there is less likely to be abuse as all the staff will be working in the same way and will feel shamed if they abuse because of the way that they have been taught to work. If an individual is considered to have a say in what he or she wants and is at the centre of any decision, it will be more unlikely that there is abuse. The individual will know what suits him or her and will not get so frustrated.

I always put the service users I work with, their families and friends at the centre of any decision about them and they are an active partner in their own care. Individuals decide what to do, where to go, what clothes to wear and are treated with dignity, respect, confidentiality and are able to make their own choices.’

Extract 2 from Discussion:
Discussion: ‘Tell me about how encouraging active participation can reduce the likelihood of abuse:
Response:
‘Active participation is a way of working that recognises an individual's right to participate in the activities and relationships of everyday life as independently as possible; the individual is regarded as an active partner in their own care or support, rather than a passive recipient.

So if the individual participates actively in their daily activities, which is what I practice, then the risk of abuse is low.

For example in choosing the kind of meal to prepare I support individuals to make the lists of what they want to buy and go shopping with them so that they can choose the brand they want. The individual cooks the food the way they want it with little or no support. This is the same with all choices of clothes and outings.’

Extract 3 from Discussion:
Discussion: ‘Tell me about how promoting choice and rights can reduce the likelihood of abuse:
Response:
‘Individuals are supported to make their choices in anything they want like in choosing food or drink, in what to wear, whether to use hot or cold water to bathe, etc. No individual will choose what will hurt him or her therefore abuse is reduced to the minimum.

Individuals’ rights are promoted throughout the service. My service user has the right to do anything that they wish to do and if it is what they want as long as it is not dangerous; a risk assessment is then done to stop any abuse happening.

I ensure that I promote service users’ rights and choices by allowing them to make their own choices and support them to have the rights of anyone else.’
COMMENTARY FOR EVIDENCE FOR AC 4.1

- **Assessment Method**: The assessor has used discussion to encourage the learner to think about how the likelihood of abuse can be reduced. ‘Tell me about…’ encourages the learner to provide a more detailed response and to also provide evidence to fully meet AC4.1. The assessment method is valid as it measures the learner’s understanding of how to reduce the likelihood of abuse.

- **Quality of Evidence**: The learner’s response is of a good quality because it reflects a full understanding of how the likelihood of abuse occurring can be reduced. The learner divides up own response to address each part of this AC in full and details how working with person-centred values, encouraging active participation and promoting choice and rights can each specifically reduce the likelihood of abuse from occurring. The learner also includes some good examples of how she applies these approaches to own working practices in own health and social care setting.

- **Breadth of Evidence**: The learner has detailed clearly how the likelihood of abuse may be reduced. The learner’s evidence meets AC4.1 fully in terms of providing an explanation of how working with person-centred values, encouraging active participation and promoting choice and rights can reduce the likelihood of abuse occurring.
Assessment Criteria:
AC 4.2 - Explain the importance of an accessible complaints procedure for reducing the likelihood of abuse

Extract from Discussion:
Discussion: ‘Tell me about why an accessible complaints procedure is important for reducing the likelihood of abuse’:

Response:
‘The complaints procedure gives the complainant the right to be heard and supported to make their views known. An accessible complaints procedure is understandable and easy to use. It sets out clearly how to make a complaint, the steps that will be taken when the complaint is looked into. It also provides flexibility in relation to target response times.

An accessible complaints procedure resolves complaints more quickly as the complainant feels that they are being listened to and their complaint taken seriously. This sets up an open culture of making sure that abuse will not be tolerated in any form and encourages the complainant to not accept this.

I remember when Mr R felt very happy when his complaint of being denied sleep was recorded in the complaints procedure. I supported him to write down the complaint and this was taken seriously…’

COMMENTARY FOR EVIDENCE FOR AC 4.2:

- Assessment Method: The assessor has used discussion to encourage the learner to think about the importance of an accessible complaints procedure. ‘Tell me about…’ encourages the learner to provide a more detailed response and to also provide evidence to fully meet AC4.2. The assessment method is valid as it measures the learner’s understanding of the importance of an accessible complaints procedure for reducing the likelihood of abuse.

- Quality of Evidence: The learner’s response is of a good quality because it reflects a full understanding of how the likelihood of abuse occurring can be reduced by an accessible complaints procedure. The learner begins by detailing her understanding of the meaning of an accessible complaints procedure and then ends on an example of the support provided to an individual in their own health and social care setting.

- Breadth of Evidence: The learner has detailed clearly how the likelihood of abuse may be reduced. The learner’s evidence meets AC4.2 fully in terms of providing an explanation of the importance of an accessible complaints procedure for reducing the likelihood of abuse.
EVIDENCE FOR LEARNING OUTCOME 5

KNOW HOW TO RECOGNISE AND REPORT UNSAFE PRACTICES

Assessment Criteria:
AC 5.1 - Describe unsafe practices that may affect the wellbeing of individuals

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<tr>
<th>Extract from Personal Statement:</th>
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<tbody>
<tr>
<td>Personal Statement: ‘Describe unsafe practices that may affect the wellbeing of individuals’:</td>
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<tr>
<td>Response:</td>
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<tr>
<td>‘Unsanitary conditions can spread infection as cross-contamination can occur and can affect the well-being of the individual and others. Improper hand washing can also pose a risk. Dirty kitchen surfaces and equipment can spread infections, not covering hair when cooking can pose a risk to individual as can not reporting faulty equipment when working or not having cleaning materials can also be unsafe.</td>
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<td>In terms of health and safety not having risk assessments in place when a service user hurts themselves. Staff not checking when a service user is ill or unsteady on their feet. Staff not recording in care plans about a service user’s wellbeing and health and not monitoring them.</td>
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<tr>
<td>Other unsafe practices which also amount to abuse can occur such as leaving a service user on the toilet too long, ignoring or not listening to them.</td>
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<td>Marks on body not taken seriously and complaints not taken seriously can put them at more danger, harm and risk of abuse.</td>
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<td>I ensure that I keep to all the procedures for checking for abuse and the wellbeing of the individuals that I work with: by following these and the individual’s care plan I keep within the minimum standards of care and also work in a person centred way to make sure all individuals are happy and safe.’</td>
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COMMENTARY FOR EVIDENCE FOR AC 5.1:

- **Assessment Method:** The learner’s personal statement provides the learner with an opportunity to express own understanding of unsafe practices. The assessment method is valid as it measures the learner’s understanding and knowledge of unsafe practices that may affect the wellbeing of individuals.

- **Quality of Evidence:** The learner’s response is of a good quality because the learner details own understanding of a range of different unsafe practices that may affect the wellbeing of individuals including those relating to the spread of infection, health and safety, neglect and abuse of individuals. The learner concludes by confirming how she works in line with agreed ways of working: ‘I keep within the minimum standards of care and also work in a person centred way to make sure all individuals are happy and safe.’

- **Breadth of Evidence:** The learner has given a detailed account of a range of different unsafe practices. The learner’s evidence meets AC5.1 fully in terms of providing a description of unsafe practices that may affect the wellbeing of individuals.
Assessment Criteria:
AC 5.2 - Explain the actions to take if unsafe practices have been identified

Extract from Personal Statement:
Personal Statement: ‘Explain the actions to take if unsafe practices have been identified’:
Response: ‘If I identify unsafe practices then I must follow the whistle-blowing procedure and report to the appropriate person(s). I will report to my manager immediately or if it involves my manager then to another appropriate person(s).

I will monitor all unsafe practices and make sure that I record and report in full all the evidence and then will talk to my manager because all unsafe practices are dangerous practices that could cause harm to the individual and others.

For example, I talked to my manager last week about things being left on the stairs that may cause service users and others to fall over and hurt themselves. She has talked to the staff and now this has stopped.’

COMMENTARY FOR EVIDENCE FOR AC 5.2:

- Assessment Method: The learner’s personal statement provides the learner with an opportunity to express own understanding of the actions to take over unsafe practices. The assessment method is valid as it measures the learner’s understanding and knowledge of the actions to take when unsafe practices have been identified.

- Quality of Evidence: The learner’s response is of a good quality because the learner details own understanding of the full actions that need to be taken when unsafe practices have been identified. The learner concludes by explaining the actions taken when unsafe practices were identified in own health and social care setting: ‘…I talked to my manager last week about things being left on the stairs that may cause service users and others to fall over and hurt themselves. She has talked to the staff and now this has stopped.’

- Breadth of Evidence: The learner has given a detailed account of the actions that must be taken when unsafe practices occur. The learner’s evidence meets ACS.1 fully in terms of providing an explanation of the actions to take if unsafe practices have been identified.
Assessment Criteria:
AC 5.3 - **Describe** the action to take if suspected abuse or unsafe practices have been reported but nothing has been done in response

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<tr>
<td>Personal Statement: Describe the actions to take if suspected abuse or unsafe practices have been reported but nothing has been done in response:</td>
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**Response:**

'If suspected abuse or unsafe practices have been reported but nothing has been done in response or if it has to do with my manager then I will report to the next level or manager.

If it has to do with my manager then I will report to management, then to the social worker and safeguarding team and to the care quality commission and even to the police depending on the response I get.

When I worked in a nursing home there was some abuse of service users being left too long on the toilet and I talked to the nurse in charge and changes were made immediately. I had to record the information and give the nurse and manager a copy of my confidential report. If the nurse or manager had not done this then I would follow the whistle blowing procedure.'

**COMMENTARY FOR EVIDENCE FOR AC 5.3:**

- **Assessment Method:** The learner’s personal statement provides the learner with an opportunity to express own understanding of the actions to take over reported suspected abuse or unsafe practices that have not been responded to. The assessment method is **valid** as it measures the learner’s understanding and knowledge of the actions to take when unsafe practices or suspected abuse have been reported but nothing has been done in response.

- **Quality of Evidence:** The learner’s response is of a good quality because the learner details own understanding of the full actions that need to be taken when suspected abuse or unsafe practices have been reported but nothing has been done in response. The learner concludes by explaining the actions taken in relation to unsafe practices that were identified in a **health and social care setting:** ‘...When I worked in a nursing home there was some abuse of service users being left too long on the toilet and I talked to the nurse in charge and changes were made immediately. I had to record the information and give the nurse and manager a copy of my confidential report. If the nurse or manager had not done this then I would have followed the whistle blowing procedure.’

- **Breadth of Evidence:** The learner has given a detailed account of the actions that must be taken when suspected abuse or unsafe practices occur and nothing has been done in response. The learner’s evidence **meets AC5.3 fully** in terms of providing a description of the actions to take if suspected abuse or unsafe practices have been reported but nothing has been done in response.
SUMMARY OF HOW EXEMPLAR EVIDENCE FOR HSC 024 MEETS THE ASSESSMENT REQUIREMENTS AND ASSESSMENT CRITERIA

<table>
<thead>
<tr>
<th>Variety of assessment methods used</th>
<th>Yes</th>
<th>Oral and Written questioning, Personal Statement, Assignment, Discussion</th>
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<tr>
<td>Valid assessment methods used</td>
<td>Yes</td>
<td>All assessment methods used were appropriate for validating the learner’s knowledge of all the assessment criteria in this unit.</td>
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<tr>
<td>Quality and Breadth of evidence sufficient</td>
<td>Yes</td>
<td>Evidence provided meets all the assessment criteria fully.</td>
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This resource has been produced to support your delivery of OCR’s Health and Social qualification. These are not mandatory but are provided to offer you creative and informative materials that you may wish to use with your learners.

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