Unit Title: Understand Advance Care Planning
Sector unit number: EOL 303
Level: 3
Credit value: 3
Guided learning hours: 25
Unit reference number: A/503/8135

Unit purpose and aim
The purpose of this unit is to assess the learner’s knowledge and understanding of advance care planning.

<table>
<thead>
<tr>
<th>Learning Outcomes</th>
<th>Assessment Criteria</th>
<th>Teaching Content</th>
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</table>
| **The Learner will:** 1 Understand the principles of **advance care planning** | **The Learner can:**  1.1 Describe the difference between a care or support plan and an Advance Care Plan.  
1.2 Explain the purpose of advance care planning  
1.3 Identify the national, local and organisational agreed ways of working for advance care planning  
1.4 Explain the legal position of an Advance Care Plan.  
1.5 Explain what is involved in an 'Advance Decision to Refuse Treatment'  
1.6 Explain what is meant by a 'Do Not Attempt cardiopulmonary resuscitation' (DNACPR) order | **Advance Care Planning** is a process of discussion between an individual and people who provide care. It specifically allows the individual to make advance decisions about their future care and may include preferred place of death, funeral arrangements, specific requests for their care as they are dying and following death. It is not the same as the more general care planning process. |
| 2 Understand the process of **advance care planning** | 2.1 Explain when advance care planning may be introduced  
2.2 Outline who might be involved in the advance care planning process | |

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<tr>
<td>2.3</td>
<td>Describe the type of information an individual may need to enable them to make informed decisions</td>
<td>Individual is the person receiving support or care in the work setting</td>
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<tr>
<td>2.4</td>
<td>Explain how to use legislation to support decision-making about the capacity of an individual to take part in advance care planning</td>
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<td>2.5</td>
<td>Explain how the individual’s capacity to discuss advance care planning may influence their role in the process</td>
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<td>2.6</td>
<td>Explain the meaning of informed consent</td>
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<td>2.7</td>
<td>Explain own role in the advance care planning process</td>
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<td>2.8</td>
<td>Identify how an Advance Care Plan can change over time</td>
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<td>2.9</td>
<td>Outline the principles of record keeping in advance care planning</td>
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<td>2.10</td>
<td>Describe circumstances when you can share details of the Advance Care Plan</td>
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<td>3</td>
<td>Understand the person centred approach to advance care planning</td>
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<td>3.1</td>
<td>Describe the factors that an individual might consider when planning their Advance Care Plan</td>
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<td>3.2</td>
<td>Explain the importance of respecting the values and beliefs that impact on the choices of the individual</td>
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<tr>
<td>3.3</td>
<td>Identify how the needs of others may need to be taken into account when planning advance care</td>
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Others may include:
- Partner
- Family
- Friends
- Neighbours
- Care worker
- Colleague
- Manager
- Social Worker
- Occupational Therapist
- GP
- Speech & Language Therapist
- Physiotherapist
- Pharmacist
- Nurse
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| 3.4 | Outline what actions may be appropriate when an individual is unable to or does not wish to participate in advance care planning | - Psychologist  
- Independent Mental Capacity Advocate  
- Community Psychiatric Nurse  
- Clinical nurse specialists |
| 3.5 | Explain how individual’s care or support plan may be affected by an Advance Care Plan | |

**Assessment**

Units need to be assessed in accordance with Skills for Care’s QCF Assessment Principles.

Assessment decisions for competence based learning outcomes (e.g. 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.

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.

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

**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.

**Details of relationship between the unit and national occupational standards**

This unit has been developed by Skills for Care in Partnership with Awarding Organisations. It provides a key progression route between education and employment (or further study/training leading to employment). It is directly relevant to the needs of employers and relates to national occupational standards developed by Skills for Care.

**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.