

Cambridge TECHNICALS

2016

### Cambridge **TECHNICALS LEVEL 3**

# HEALTH AND SOCIAL CARE

## Unit 16 Supporting people with dementia

K/507/4435 Guided learning hours: 60 Version 5 – October 2019 Assessment Guidance updated for LO3

ocr.org.uk/healthandsocialcare

#### LEVEL 3

#### **UNIT 16: Supporting people with dementia**

#### K/507/4435

#### **Guided learning hours: 60**

**Essential resources required for this unit:** For LO3 and LO4, learners will need access to relevant case studies from authoritative sources

This unit is internally assessed and externally moderated by OCR.

#### UNIT AIM

Dementia describes a set of symptoms, rather than one condition. It is not a natural part of the aging process, but is affecting more and more people. Whatever area of the sector you are planning to work in, you will need some understanding of the needs of people with dementia, whether they are the person to whom you are providing a service, or a visitor to your setting.

The term 'dementia' covers a wide set of symptoms that include confusion, loss of memory and communication problems. As it is progressive, the symptoms will gradually get worse and can, therefore, have a devastating effect on the person with dementia, as well as close family and friends.

The aim of this unit is to allow you to support people with dementia in planning their own care and support by providing you with an overview of the different types of dementia and the legislation which is in place to support the care of people with dementia. You will explore treatments, as well as the role of the health and social care workers who support individuals with dementia.

#### **TEACHING CONTENT**

The teaching content in every unit states what has to be taught to ensure that learners are able to access the highest grades.

Anything which follows an i.e. details what must be taught as part of that area of content. Anything which follows an e.g. is illustrative; it should be noted that where e.g. is used, learners must know and be able to apply relevant examples in their work, although these do not need to be the same ones specified in the unit content.

For internally assessed units you need to ensure that any assignments you create, or any modifications you make to an assignment, do not expect the learner to do more than they have been taught, but must enable them to access the full range of grades as described in the grading criteria.

| Learning outcomes  | Teaching content  |  |  |  |
|--|---|--|--|--|
| The Learner will:  | Learners must be taught:  |  |  |  |
| <ol> <li>Understand types<br/>of dementia and<br/>the impact of<br/>dementia and<br/>diagnosis on<br/>individuals</li> </ol> | <ul> <li>1.1 Types, i.e.</li> <li>Alzheimer's disease</li> <li>vascular dementia</li> <li>Lewy bodies</li> <li>frontotemporal dementia (including Pick's disease)</li> <li>mild cognitive impairment</li> </ul> 1.2 Common signs, i.e. <ul> <li>memory problems (e.g. frequently searching for words, impaired conversations, unable to recall specific instances or recent events, getting lost in familiar places, difficulty performing familiar tasks)</li> <li>confusion or impaired reasoning</li> <li>changes in behaviour</li> </ul> 1.3 Components for diagnosis, i.e. <ul> <li>medical history (e.g. prior illnesses, current conditions)</li> <li>medication history</li> <li>complete physical exam (e.g. vision, pulse, hearing)</li> <li>laboratory tests (e.g. blood, urine, brain scan)</li> <li>neuropsychological tests (e.g. assessment of cognitive function)</li> </ul> 1.4 Benefits of early diagnosis (e.g. rule out other conditions (e.g. depression, urinary tract infection), access to medication to slow down dementia, increase awareness of dementia and its implications, access to benefits, knowledge of legal implications (e.g. power of attorney), awareness of access to services and types of services available, awareness of an Integrated Care Pathway) |  |  |  |

| Learning outcomes   | Teaching content   |  |  |  |
|---|--|--|--|--|
| The Learner will:   | Learners must be taught:   |  |  |  |
|   | <ul> <li>1.5 Impact on individual, i.e.</li> <li>fluctuation of needs and abilities (e.g. they change over time as a result of their condition, they are highly individual, they involve more than memory alone, dysfunction of one area of the brain will affect another and may include self-awareness/identity awareness, anxiety)</li> <li>confusion</li> <li>grief (e.g. Kubler-Ross grief cycle - denial, anger, depression, bargaining, acceptance)</li> <li>disorientation</li> <li>employment</li> <li>financial</li> <li>independence</li> <li>social</li> <li>relationship breakdown</li> </ul> 1.6 Impact on family/friends (e.g. loss of socialisation, increased stress levels, feeling of guilt, need to balance commitments, anger, loss of financial support/increased financial needs, fear/worry for future, feeling embarrassed, bereavement/loss of the person they knew) |  |  |  |
| 2 Know legislation and<br>frameworks which<br>support the care of<br>individuals with<br>dementia | <ul> <li>2.1 Legislation, i.e.</li> <li>Mental Health Act (1983)</li> <li>The Human Rights Act (1998)</li> <li>Disability Discrimination Acts of 1995 and 2005</li> <li>Care Standards Act (2000)</li> <li>Equality Act (2010)</li> <li>Mental Capacity Act (2005) (including, Deprivation of liberty safeguards (2009)</li> <li>Care Act 2014</li> <li>2.2 Frameworks, i.e.</li> <li>Living well with dementia – the National Dementia Strategy</li> <li>NICE-SCIE Guideline on supporting people with dementia and their carers in health and social care.</li> </ul>  |  |  |  |

| Learning<br>outcomes   | Teaching content   |
|--|--|
| The Learner will:  | Learners must be taught:   |
| 3 Be able to<br>support<br>individuals with<br>dementia to plan<br>their care and<br>support | <ul> <li>3.1 Treatments and approaches, i.e.</li> <li>psychotherapy</li> <li>environmental modifications</li> <li>medication</li> <li>psychosocial intervention, i.e. behaviour, emotional, cognitive and stimulation-orientated therapy</li> <li>other therapies such as physical or complementary therapies,</li> <li>life story work</li> </ul>   |
|  | <ul> <li>3.2 Person centred approach, i.e.</li> <li>recognising individuality</li> <li>enabling choice</li> <li>enabling social relationships</li> <li>valuing the individual</li> <li>providing the opportunity for stimulation</li> <li>empowerment</li> <li>inclusion</li> <li>looking at the whole person rather than their diagnosis</li> </ul>   |
|  | <ul> <li>3.3 Practitioners and services involved with caring for individuals with dementia, i.e.</li> <li>GPs</li> <li>domiciliary care assistants</li> <li>day care centres</li> <li>respite care</li> <li>sheltered housing</li> <li>residential care homes</li> <li>voluntary and charitable organisations</li> <li>specialist services (e.g. Community Mental Health Team (CMHT), Consultant Psychiatrist for Older Adults, Community Psychiatric Nurse (CPN), Admiral Nurses, Occupational Therapist, memory services, social workers, physiotherapists, speech and Language therapists, telecare)</li> </ul>   |
|  | <ul> <li>3.4 Responsibilities, i.e.</li> <li>multi-agency working and care planning, i.e. <ul> <li>person-centred care</li> <li>multi-agency co-ordination</li> <li>individual care planning; (e.g. focus on individual, not on the dementia</li> <li>involve family and friends of the individuals with dementia</li> </ul> </li> <li>health and wellbeing (e.g. help to meet physical needs (e.g. food and water; including infection prevention and control, help with self-care skills (e.g. washing, dressing, eating and drinking),provide appropriate opportunity for physical and mental exercise, monitor the use of medicines, safeguard against accidents (e.g. appropriate environment, use of assistive technologies (e.g. pressure mats and personal pendant alarms),protection from abuse; physical, emotional, neglect or financial)</li> <li>quality of life (e.g. promote independence and choice, provide activities and opportunities to socialise, aid communication in preferred form, promote individuality (e.g. learn about the individual's life history to ensure their needs and preferences are taken into account), application of care values)</li> </ul> |

#### **GRADING CRITERIA**

| LO   | Pass   | Merit  | Distinction  |
|--|--|--|--|
|  | The assessment criteria are the Pass requirements for this unit.   | To achieve a Merit the evidence must<br>show that, in addition to the Pass<br>criteria, the candidate is able to:                        | To achieve a Distinction the evidence<br>must show that, in addition to the pass<br>and merit criteria, the candidate is able<br>to: |
| <ol> <li>Understand types of<br/>dementia and the impact of<br/>dementia and diagnosis on<br/>individuals</li> </ol> | <ul> <li>P1:Describe types of dementia and common signs</li> <li>P2: * Describe the components for the diagnosis of dementia</li> <li>P3: Explain the benefits of early diagnosis of dementia</li> </ul>   | M1:<br>Explain why the needs and abilities of<br>individuals with dementia may fluctuate   | D1:<br>Analyse the possible impact of the<br>dementia diagnosis on an individual<br>and their family/friends                         |
| 2. Know legislation and<br>frameworks which support<br>the care of individuals with<br>dementia                      | P4: * Describe legislation and<br>frameworks which support the care of<br>individuals with dementia  |  |  |
| <ol> <li>Be able to support<br/>individuals with dementia<br/>to plan their care and<br/>support</li> </ol>          | <ul> <li>P5: Suggest services within the health and social care sector that can best support the needs of individuals with dementia</li> <li>P6*: Evaluate the effectiveness of using a person centred approach to the care of an individual with dementia</li> <li>P7: Identify practitioners involved in the care of individuals with dementia</li> <li>P8: * Describe the roles and responsibilities of health and social care practitioners in improving the health and quality of life for individuals with dementia</li> </ul> | M2:<br>Evaluate the effectiveness of multi-<br>agency working in improving the health<br>and quality of life for people with<br>dementia |  |

#### SYNOPTIC LEARNING AND ASSESSMENT

It will be possible for learners to make connections between other units over and above the unit containing the key tasks for synoptic assessment, please see section 6 of the centre handbook for more details. We have indicated in this unit where these links are with an asterisk and provided more detail in the assessment guidance section below.

#### LO1: Understand types of dementia and the impact of dementia and diagnosis on individuals

Learners must firstly describe types of dementia and common signs and symptoms. They must also describe the components of a diagnosis of dementia. Learners must also be able to explain the benefits of an early diagnosis. For M1 learners need to explain why the needs and abilities of individuals with dementia fluctuate.

To achieve D1 learners need to draw all this together and must analyse the possible impact of the dementia diagnosis on an individual **and** their family/friends. For this LO learners will benefit from drawing on learning from mandatory Unit 1 Building positive relationships in health and social care, mandatory Unit 2 Equality, diversity and rights, Mandatory unit 4 Anatomy and physiology LO5. Unit 14 The impact of long term physiological conditions LO1, 2, 3. Unit 22 psychology for health and social care LO3, 4. Unit 23 Sociology for health and social care LO2.

#### LO2: Know legislation and frameworks which support the care of individuals with dementia

Learners must provide a description of the relevant legislation and frameworks which govern the work with individuals with dementia. For this LO learners will benefit from drawing on learning from mandatory Unit 2 Equality, diversity and rights LO3.

#### LO3: Be able to support individuals with dementia to plan their care and support

Learners must be able to identify and describe suitable support services that can best support the needs of individuals with dementia, evaluating the effectiveness of person-centred care on individuals with dementia. This can be done through the use of case studies. Learners must be able to identify practitioners involved in the care of individuals with dementia **and** describe the roles and responsibilities of these practitioners in improving the health and quality of life for individuals with dementia. In order to achieve M2, learners must provide an evaluation of the effectiveness of multi-agency working improving the health and quality of life for people with dementia. For this LO learners will benefit from drawing on learning from mandatory unit 3 Health, safety and security in health and social care; Unit 6 Personalisation and a person centred approach to care; Unit 7 Safeguarding; Unit 11 Career planning in health and social care LO LO1,2,4; Unit 12 Promote positive behaviour; Unit 15 Promote health and wellbeing. Unit 17 Supporting people with mental health conditions LO2; Unit 18 caring for older people; Unit 19 Creativity and activity for adults.

**Feedback to learners**: you can discuss work-in-progress towards summative assessment with learners to make sure it's being done in a planned and timely manner. It also provides an opportunity for you to check the authenticity of the work. You must intervene if you feel there's a health and safety risk.

Learners should use their own words when producing evidence of their knowledge and understanding. When learners use their own words it reduces the possibility of learners' work being identified as plagiarised. If a learner does use someone else's words and ideas in their work, they must acknowledge it, and this is done through referencing. Just quoting and referencing someone else's work will not show that the learner knows or understands it. It has to be clear in the work how the learner is using the material they have referenced to inform their thoughts, ideas or conclusions.

For more information about internal assessment, including feedback, authentication and plagiarism, see the centre handbook. Information about how to reference is in the OCR Guide to Referencing available on our website: <u>http://www.ocr.org.uk/i-want-to/skills-guides/</u>.

#### To find out more ocr.org.uk/healthandsocialcare or call our Customer Contact Centre on 02476 851509

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