

# The Awarding Body Quality Group for the Health & Social Care Sectors' N/SVQs 2009/10

## Frequently Asked Questions

### Scope:

Information supplied in this document has been developed through the partnership of Awarding Bodies offering a range of N/SVQs and VRQs in the Health and Social Care sectors.

## 1. *GENERIC*

### 1.1 Where can information on funding for learning and training be obtained?

**England:** Your local Learning & Skills Council

[www.lsc.gov.uk](http://www.lsc.gov.uk)

**Wales:** Department of Children, Education, Life Long Learning and Skills (Welsh Assembly Government)

[www.wales.gov.uk](http://www.wales.gov.uk)

**Northern Ireland:** Department of Education & Learning Northern Ireland

[www.delni.gov.uk](http://www.delni.gov.uk)

**Scotland:** Learn Direct Scotland

[www.learnirectscotland.com](http://www.learnirectscotland.com)

### 1.2 Where can I find further information relating to National Occupational Standards and skills?

The National Occupational Standards (NOS) and skills and knowledge sets are owned and maintained by the relevant Sector Skills Councils. These can be located at the following websites:

<a href="http://www.skillsforcareanddevelopment.org.uk">www.skillsforcareanddevelopment.org.uk</a>	(Skills for Care and Development):
<a href="http://www.cwdcouncil.org.uk">www.cwdcouncil.org.uk</a>	(Children's Workforce Development Council)
<a href="http://www.skillsforcare.org.uk">www.skillsforcare.org.uk</a>	(Skills for Care)
<a href="http://www.ccwales.org.uk">www.ccwales.org.uk</a>	(Care Council for Wales)
<a href="http://www.cwdcouncil.org.uk">www.cwdcouncil.org.uk</a>	(Children's Workforce Development Council)
<a href="http://www.niscc.info">www.niscc.info</a>	(Northern Ireland Social Care Council)
<a href="http://www.skillsforhealth.org.uk">www.skillsforhealth.org.uk</a>	(Skills for Health)
<a href="http://www.sssc.uk.com">www.sssc.uk.com</a>	(The Scottish Social Services Council)

Furthermore you can search on the **UK Standards website as the main NOS website** [www.ukstandards.org.uk](http://www.ukstandards.org.uk) (then search for the specific NOS).

### **1.3 Where can I find the evidence requirements?**

The evidence requirements can be located in the individual Awarding Body's guidance documentation.

### **1.4 Does the portfolio belong to the candidate, the centre or the employer?**

The portfolio of evidence is the property of the candidate – it should confirm their competence only. The assessment and verification records are the property of the centre and should be retained according to regulatory requirements.

### **1.5 Can candidates get their N/SVQ when they only look after a relative/partner/a single service user in a domestic setting?**

Yes. Candidates can use evidence solely from one service user, where the candidate works with no other individual. However they must still be able to cover all the evidence requirements. For this reason candidates must bring such situations to the attention of their centre so that it can be discussed and agreed with the Awarding Body External Verifier prior to candidate registration. This should help to avoid candidates being registered for qualifications which they cannot fully achieve. Where possible candidates should be encouraged to complete the qualification in a wider setting as the collection of evidence from such a restricted setting may prove difficult.

### **1.6 Can a tutor/trainer delivering the underpinning knowledge also assess candidate performance?**

Yes, so long as they meet the vocational competence and assessor qualification requirements for assessors of this N/SVQ.

### **1.7 What is a peripatetic assessor?**

A peripatetic assessor is an assessor who travels between locations undertaking assessment in a candidate's work place. Best practice requires that candidates are assessed undertaking normal work activities therefore, where a candidate does not have a work-based assessor, they can be visited by a peripatetic assessor to undertake this assessment. A peripatetic assessor is able to visit candidates at different locations, giving the candidate access to assessment opportunities. An assessor needs to be qualified in assessment; competent in the units they are assessing, and have sufficient time to undertake their role.

### **1.8 Can candidates record the narrative of direct observations of performance?**

It has been agreed with OFQUAL that for the Health and Social Care and Children's Care Learning and Development NVQs, the minimum recording requirement for assessors when carrying out observations of candidates is a signed statement that they have observed the practice and they agree with the candidate's account of the observed activity. However, it is expected that in the majority of instances, assessors will provide additional evaluative comments. In the majority of instances assessors should also make their own brief notes of any observation where this would provide a clearer audit trail. Centres should seek guidance from their Awarding Body prior to assessment.

### **1.9 Can video/audio tapes be used to record direct observational evidence?**

The use of these types of media to record evidence must meet the rules of evidence and be agreed with all concerned prior to its use and be in keeping with the ethos of the sector. Regardless of the media used, all the assessment records and evidence must remain auditable and accessible.

### **1.10 Are witnesses required to write their testimony statement?**

No. There may be a valid reason, which has been identified at the beginning of the assessment by the assessor, which would allow witnesses to have statements written on their behalf. Testimony can be oral or recorded and the assessor must endorse the statement.

### **1.11 What is the difference between a witness and an expert witness?**

The use of expert witnesses is encouraged as a contribution to the provision of evidence of the candidate's competence. Expert witnesses may be used where there are no occupationally competent assessors for occupationally specific units or to minimise intrusion, and only then for the optional units. Within these units only the observation requirements can be met by either the assessor or the expert witness.

Expert witness requirements are identified in the assessment strategy and they must be inducted into this role by the centre. All other witnesses are individuals who may have been present at a particular incident, or are able to provide evidence of consistency of practice etc but there are no **formal** requirements identified for them and their testimony can never meet the observation requirements.

### **1.12 Why can't expert witnesses provide evidence for the core units?**

Assessors are expected to be occupationally competent and to take the lead role in the assessment of the core units of the qualification.

Assessment evidence identified by the expert witness can be considered by the qualified assessor for inclusion towards the core units. This is to ensure consistency in assessment of core activities and to contribute to raising standards in health and social care environments.

### **1.13 What vocational competence requirements are expected of expert witnesses?**

They must be able to prove their competence in the units with which they are involved. The assessment strategy is clear about the definition of an expert witness – either any qualification in assessment of workplace competence **or** a professional work role which involves evaluating the everyday practice of staff as well as current expertise, occupational competence and knowledge of the NOS. Refer also to 1.11.

Further details regarding the use of expert witnesses can be found in awarding body documentation.

### **1.14 How do I provide evidence when the information is confidential?**

Confidential records must not be included within the candidate's portfolio. Clear reference must be made as to where the information is located and assessor records should identify how the evidence meets the standards.

**1.15 Can photographic evidence of a candidate's work with service users and children be presented as evidence within a portfolio?**

Under no circumstances should photographs of service users or children be included within candidate portfolios; even if faces are obscured. Centres must advise candidates of the need to protect service users' and children's privacy within their evidence collection.

**1.16 If an employee has been suspended pending a POVA investigation can they continue being assessed for the qualification?**

Any employee suspended from work duties, for whatever reason, cannot be assessed for either knowledge or competence during the period of suspension.

**1.17 Does the internal verifier have to sample every candidate?**

No, but all assessors, all units and all types of evidence must be sampled. Your internal verification sampling strategy should provide a rationale for your sampling plan. You should also check with your awarding body that their specific requirements are met.

**1.18 Who can countersign the assessment decisions of a trainee assessor?**

The person who countersigns the decisions of a trainee assessor must be A1 qualified **and** occupationally competent in the units they are countersigning.

**1.19 When do the A1 and V1 units expire?**

These qualifications expire for registration in December 2010 but they will remain valid as assessor and verifier qualifications.

**2 HEALTH AND SOCIAL CARE**

**2.1 Do I have to register for the Adult pathway or the Children and Young People pathway at the beginning, or can I decide afterwards?**

The decision has to be made before, or at the time of, registration. The nature of the N/SVQ candidate's job role will determine the sources of evidence they are likely to use and therefore the most suitable pathway and option units to follow.

**2.2 How will I know which units cannot be combined?**

The qualification guidance will show the structures and excluded combinations for N/SVQ achievement and eligibility for certification. The descriptions of the units themselves also indicate which other(s) they cannot be combined with, where appropriate.

**2.3 Why are there additional units there?**

To provide opportunities for professional development and units to meet employers' needs for specific job roles.

#### **2.4 Can I use additional units instead of optional units to achieve a full qualification?**

No, additional units are to be used only as described in 2.3. Centres should check the registration requirements of the country in which they operate when advising candidates.

#### **2.5 Can I use units from a different level to achieve my N/SVQ?**

No. Units from a different level can be used towards CPD activity however to achieve a full N/SVQ all units need to come from within that qualification structure.

#### **2.6 What range of assessment methods can be used?**

There are suggestions for a range of appropriate methods that can be used within the evidence requirements for each unit. These are not exhaustive.

#### **2.7 How do we record the scope?**

The scope is the context in which the assessment is undertaken; it provides ideas of what to look for and not requirements. It should be used as part of the assessment planning process and acknowledgment needs to be given when it is used.

#### **2.8 I have completed my N/SVQ on the 'Adults' pathway and now have a post which requires the Children and Young people pathway. Will I be able to use any of this evidence for the new pathway?**

Some units can be directly transferred between the pathways because they are identical. The context specific unit(s) and any other units selected will then need to be evidenced. Your assessor can apply the rules of Recognition of Prior Learning to assess any existing evidence which may be of value and then plan to cover any evidence gaps through the application of the required assessment method(s).

#### **2.9 HSC 386 Assist in the transport of individuals between agencies and services**

**In the knowledge specifications there is a sub-heading 'Working within the substance misuse sector'. Can this unit be undertaken by candidates working in contexts other than substance misuse?**

Yes. In such cases the sub-heading title may be ignored and knowledge statements 3 and 4 should be evidenced from the context in which the candidate operates.

#### **2.10 HSC 3108 Facilitate learning through presentations and activities**

**The knowledge requirements from knowledge numbers 34 to 51 are preceded by the statement "if you are carrying out this function in a substance misuse context you will require the following knowledge..." Is this additional demand correct?**

This matter has been referred to Skills for Care and Development which has provided interim guidance that candidates do not have to cover these additional knowledge specifications whatever their work context.

### **3 LEADERSHIP AND MANAGEMENT FOR CARE SERVICES (LMCS)**

#### **3.1 I have only worked in Children's Services; can I assess a candidate working with adults?**

No. The Assessment Strategy is very clear. Assessors must be occupationally competent in the units they are assessing and therefore the context of the service in which they operate is a significant factor.

#### **3.2 I have experience in Care Management but no qualifications. I am an A1 qualified assessor and a V1 qualified internal verifier. Can I internally verify the LMCS?**

Yes. The assessment strategy requires internal verifiers to have working knowledge of management within health and social care settings, the regulation, legislation and codes of practice for the service (where applicable), and the requirements of national standards at the time any assessment is taking place.

#### **3.3 What is meant by "occupationally competent" with regards to the requirements for IV in the LMCS Assessment Strategy?**

An IV with experience as a practitioner, manager or trainer gained within the context of Health & Social Care will be considered as occupationally competent to undertake this role.

#### **3.4 What are the observation requirements for the LMCS units?**

The requirements are recorded within the body of the evidence requirements which will be replicated in each awarding body's qualification guidance. Competent performance will be evidenced from candidates' real work practice some of which must be observed. Sufficient observations, combined with other types of evidence across the N/SVQ should be planned to allow the assessor to make a safe judgement of candidate competence.

### **4 HEALTH**

#### **4.1 What is the transferability of Level 3 N/SVQs in Health and Social Care to the Health N/SVQs?**

Complete units can be transferred if they have the same S/QCA accreditation number. The core units where appropriate and evidence can be transferred or mapped through Accreditation of Prior Learning (APL), if the S/QCA number is different.

#### **4.2 Level 3 EUSC1 – Take a presenting history from an individual to inform assessment**

#### **Level 3 EUSC2 Obtain supporting information to inform the assessment of an individual**

**The above two units make reference in the standards to gaining informed consent from individuals who are unable to give consent on their own behalf. References can be found in the performance criteria and key words and concepts. Does this now conflict with the practice requirements embedded in**

**the Mental Capacity Act of 2005 and thereby encourage candidates to produce evidence based on inappropriate activity?**

Yes. As the Mental Capacity Act (2005), which acquired royal assent in 2007, identifies that no one can give consent on behalf of another adult unless the carer/family member/significant other has lasting power of attorney which has been registered with the Office of the Public Guardian or the patient has been appointed a Court Appointed Deputy by the Court of Protection then terminology, embedded in the standards and which suggests this is not the case, should be ignored.

Assessors and verifiers should be made aware of this anomaly created in consequence of new legislation being introduced after the NOS were developed and advise that an oral question re the legislation above would provide evidence of candidates' knowledge of current legislation and its impact on practice.

**5 CHILDRENS CARE LEARNING AND DEVELOPMENT (CCLD)**

**5.1 What is the age range for CCLD?**

0 -16 but evidence must come from the age range in which candidates are working. There is just 1 unit at each level, 203,303 AND 403, that will require broad/general knowledge of child development across the whole age range but competence will be assessed within the age range the candidate is working with.

**5.2 I work with children, which qualification should I do, CCLD or HSC (Children and Young People)?**

It depends on the context of your job and the role and the regulatory requirement of your work. CCLD is normally associated with those who work in the provision of non-statutory childcare provision e.g. day nurseries, childminders. Health & Social Care (CYP pathway) is normally associated with those who work in the provision of statutory services for children 'looked after' e.g. residential and fostering services.

You should also seek advice from your employer and look for updates/advice from the Sector Skills Council - Skills for Care and Development [www.skillsforcareanddevelopment.org.uk](http://www.skillsforcareanddevelopment.org.uk) to ensure you register on the appropriate qualification.

**5.3 I recently achieved the Certificate in Early Years Foundation Stage Practice. Can I use this towards the underpinning knowledge for my Level 3 CCLD?**

Yes. Under the rules of Recognition of Prior Learning, all relevant evidence from previous learning and / or achievement can be presented to an assessor for consideration.