
1 Unit 1: Promoting Quality Care

[AS level, mandatory, externally assessed]

1.1 ABOUT THIS UNIT

This AS level unit is mandatory and externally assessed.

If you are considering a career in health, social care or early years, it will be important to know how you can contribute to promoting quality care within a setting.

This unit links with Unit 5: *Caring for people with additional needs* and Unit 6: *Working in early-years care and education*. This unit forms the basis upon which Unit 10: *Care practice and provision* is structured. Additionally, this unit has links with Unit 11: *Understanding human behaviour*, Unit 14: *Mental health issues* and Unit 15: *Social trends*. Although this unit does not link directly to the NVQs in Providing health, social and protective services, it provides a broad introduction to the qualifications involving Care, Caring for Children and Young People, and Early-Years Education at Levels 2 and 3.

This unit is assessed through an external assessment. The mark on that assessment will be your mark for the unit.

1.2 WHAT YOU NEED TO LEARN

You need to learn about:

- attitudes and prejudices;
- rights and responsibilities of service users and providers;
- facilitation of access to services;
- care values;
- safe working.

1.2.1 Attitudes and Prejudices

Individuals who need health, social care or early-years services can be highly vulnerable because they are dependent on others for their care. This means that practitioner's attitudes and prejudices can affect the care service user's experience.

You need to know how attitudes and prejudices are learnt, which for testing purposes will be limited to the following agencies:

- primary socialisation – early in life – e.g. the influence of the family;
- secondary socialisation – later in life – e.g. education, media, work, peers.

You need to understand the possible effects of attitudes and prejudices on service users, which for testing purposes will be limited to:

- health and well-being;
- self-esteem and sense of empowerment;
- unfair treatment – direct and indirect discrimination.

1.2.2 Rights and Responsibilities of Service Users and Providers

All members of society have fundamental human rights. You need to appreciate how the law is used to protect and promote certain rights. You need to know the legal rights that service users have, and explain the safeguards enshrined within each act, which, for testing purposes, will be limited to:

- the Children Act 1989, which sets out key duties of the local authority and other agencies in terms of meeting the needs of children who are 'at risk', the need to listen to the wishes of children and the 'paramountcy principle' – you are not expected to know this act in great detail, just the key principles, and some basic strengths and weaknesses;
- the Sex Discrimination Act 1975 and 1986, the Race Relations Act 1976 (Amendment) Regulations 2003, and the Disability Discrimination Act 1995, which provide legal definitions of direct and indirect discrimination, the scope of the law and the opportunities for redress – you need to outline the types of discrimination each act makes illegal, where it applies, and some basic strengths and weaknesses;
- the Mental Health Act 1983, which governs the admission of people to psychiatric hospitals against their will, their rights whilst detained, discharge from hospital, and aftercare – this Act applies in England and Wales – you are not expected to know this act in great detail, just the key principles, and some basic strengths and weaknesses;
- the Human Rights Act 1998, which makes it unlawful for public bodies to violate the rights contained in the European Convention on Human Rights which includes police, government departments and local councils – you are not expected to know this act in great detail, just the key principles, and some basic strengths and weaknesses.

The legislation is not the same throughout the UK. You need to know the laws which apply to the country in which you live. In Northern Ireland, this includes:

- Sex Discrimination (Northern Ireland) 1970 (amended 1984);
- Race Relations (Northern Ireland) Order 1976 (amended 1988);
- Disability Discrimination Act 1995;
- Equality (Northern Ireland) Order 2000;
- Northern Ireland Act 1998.

You need to identify the appropriate piece of legislation that would protect the right of an individual in a given situation, and give examples of the rights they are entitled to by law. You need to understand the procedures that need to be followed in a given situation.

It is important to remember that some rights are qualified, e.g. the right to freedom of expression is qualified so that it is illegal to incite racial hatred.

Service providers have to ensure that, when promoting the rights of a service user, they are not affecting the rights of others. You need to appreciate that those who exercise their rights also have responsibility for themselves and for others.

You need to identify the boundaries that apply to service users' rights within given health, social care and early-years contexts or situations. You will be tested on your knowledge and understanding of when information should be kept confidential, and when it should be passed on to other practitioners or organisations on a 'need-to-know' basis, including:

- when a service user is at risk of harm;
- when others may be at risk of harm;
- when the service user is at risk of harming others;
- when the service user is intending to or is breaking the law (a serious crime).

You will also be tested, through given scenarios, on when service users' wishes can be overruled in cases of mental health and children.

1.2.3 Facilitation of Access to Services

Service providers are required to ensure fair and equal access to their services. As a result, providers work to reduce the barriers which lead to social exclusion.

You need to identify the barriers that can affect a service provider's ability to deliver services for everyone and give a detailed explanation of how the barrier affects the service user/group's access to services. For testing purposes these will be limited to:

- *physical barriers* that affect service users with mobility problems when the existing premises and facilities have been designed on the assumption that all service users are able-bodied;
- *psychological barriers* – individuals may be unwilling to visit their GP because they are frightened of the diagnosis they may receive, or the perceived stigma attached to the illness – service users with mental health problems may not recognise that they need a particular service;
- *financial barriers* – individuals on low incomes may be discouraged from accessing a service because of the cost, and may be unaware of any benefits they may be entitled to – financial barriers may also arise because of a lack of funding to ensure that the level of provision matches the demand;

- *geographical or location barriers* – service users in rural areas may have difficulty in accessing specialist services and there may be insufficient outreach provision or public transport may be limited – access to services may also be affected by the so-called ‘postcode lottery’ which means that, because of regional differences, the level of services available depends on where you live;
- *cultural and language barriers* – some service users may experience social exclusion because the service provider has not understood or accounted for the cultural differences that exist – service users for whom English is their second language could find it difficult filling out forms and communicating with practitioners.

You also need to know the ways in which inclusive service providers facilitate access to services, which for testing purposes will be limited to:

- adaptation of existing premises and facilities;
- use of campaigns to raise awareness and change attitudes;
- promotion of self-advocacy;
- identification of additional sources of funding;
- joint planning and funding to ensure an effective integration of services.

1.2.4 Care Values

The values relating to caring for others are derived from ideas about human rights. These values underpin all practical caring.

You need to know the care values which apply to health and social care settings as established by the Care Consortium (revised 2000), which for testing purposes will be limited to:

- promoting equality and diversity of service users;
- promoting individual rights and beliefs;
- maintaining confidentiality.

It is important to understand that, although there are some common themes, the care values which apply to health and social care settings are different from those within early-years. These are:

- making the welfare of the child paramount;
- keeping the children safe and maintaining a healthy environment;
- working in partnership with parents/families;
- making sure that children are offered a range of experiences and activities that supports all aspects of their development;
- valuing diversity;
- equality of opportunity and anti-discriminatory practice;
- maintaining confidentiality;
- working with others;
- reflective practitioners.

You need to explain the ways in which these underlying principles and values are applied by health, social care and early-years practitioners in their day-to-day work.

1.2.5 Safe Working

You need to know what codes of practice, charters and organisational policies are, and how they promote quality care whilst protecting health, social care and early-years practitioners.

You need to learn about the components of an equal opportunities policy including:

- *a policy statement* explaining who is covered by the policy and what is meant by goods, facilities and services; stating the aims and outcomes of the policy; the link to the organisation's vision or mission statement and business plan; have reference to the legal requirements; indicate who is responsible for implementation;
- *an implementation plan* which includes commitment from senior management and staff; consultation with service users, staff and the wider community; the training of staff to promote ownership and good practice; target setting and timescales; establishing methods for monitoring and measuring progress; communicating the policy to service users and staff;
- the ways in which the policy will be *monitored* to include the collection of data, e.g. by gender for applications for services, those refused services, complaints;
- *an evaluation* of the policy to see whether the policy has ensured fair representation of people from all groups in the community; high levels of service user satisfaction; a good reputation of the organisation in the local community;
- after evaluation, *targets* can be set to improve future performance.

You also need to understand the purpose of other policies, which, for testing purposes will be limited to:

- harassment;
- bullying;
- confidentiality.

You also need to identify and explain how codes of practice and organisational policies reflect day-to-day practice, which, for testing purposes will be limited to the Equal Opportunities Code of Practice on:

- staff selection;
- training and professional up-dating;
- staff knowledge and understanding of policies and procedures;
- fostering positive attitudes in staff;
- support systems for service users and staff.

1.3 GUIDANCE FOR TEACHERS

1.3.1 Guidance on Delivery

Attitudes and prejudices

Candidates need to explain the process of *socialisation* by which individuals learn their values, beliefs and norms of behaviour, and how this can lead to holding certain attitudes and beliefs.

Candidates need to identify examples of negative attitudes and prejudice that can occur within health, social care and early-years settings, and show understanding of how these can affect a service user's health and well-being, self-esteem and sense of empowerment, and the care they receive, e.g. if a health care worker holds prejudices towards asylum seekers, this could affect the quality of care they provide to a service user. This, in turn, could mean that the service user is reluctant to ask for help because they develop a sense of helplessness, and may go without vital health care.

This part of the specification could be delivered through the use of case studies to enable candidates to pick out the attitudes and prejudices reflected in the actions of health care workers, before discussing the possible effects on the service user.

Rights and responsibilities of service users and providers

Candidates could be encouraged to complete a mapping exercise of each act, including the main legal rights of service users, so that they can correctly identify the appropriate piece of legislation that would protect the right of an individual in a given situation, and give examples of the rights they are entitled to by law.

Facilitation of access to services

Candidates will be tested on their evaluative skills to make reasoned judgements and draw valid conclusions about the effectiveness of the ways in which service providers facilitate access to services.

Care values

Candidates need to appreciate that care values are derived from ideas about human rights and that these underpin all practical caring. They need to explain, with examples, and demonstrate an in-depth understanding of the ways in which these underlying principles and values are applied in the day-to-day work with service users in health, social care and early-years settings, e.g. how knocking on the door of a resident's room can promote their rights, because the care worker has shown respect for the resident's private space, given them the choice of whether to allow them into the room, and avoided the possible embarrassment of the care worker walking in at an inappropriate time. Therefore, this simple action promotes the resident's rights of privacy, choice and dignity.

Safe working

It would be beneficial for candidates to look at some codes of practice but, for testing purposes, they will not be asked specific details. However, the following charters will provide useful insight into the purpose of charters:

- 'Home Life', a landmark code of good practice, published in 1984 by the Centre for Policy on Ageing for residential care and sponsored by the DHSS, which was followed up in 1996 by the publication 'A Better Home Life' – these two documents have had a major influence on the quality of residential care for older people;
- A Code of Practice for Nursing Staff and Midwives: Nursing and Midwifery Council (NMC);
- How to Behave: An Equal Opportunities Code of Practice;
- Special Educational Needs Code of Practice;
- Access to Government Information Code of Practice.

Candidates will be tested on their knowledge of the components of an equal opportunities policy although they do not need to know detailed information about the content of other policies. Rather, they need to explain their purpose.

Candidates will be tested on evaluating given evidence to make reasoned judgements and draw valid conclusions about the effectiveness of codes of practice and organisational policies in promoting safe working in health, social care and early-years settings.

1.3.2 Guidance on Assessment

This unit is externally assessed.

1.3.3 Resources

<p>Organisations</p>	<p>The Commission for Racial Equality The Disability Rights Commission The Equal Opportunities Commission Centre for Policy on Ageing The Equality Commission for Northern Ireland The Information Commissioner The Health Service Ombudsman Age Concern Royal Association for Disability and Rehabilitation Mencap Mind NSPCC</p>
<p>Publications</p>	<p>Nursing Times Magazine Health Matters</p>
<p>Textbooks</p>	<p>Sociology texts will explain the process of socialisation</p>
<p>Websites</p>	<p>www.ace.org.uk www.cpa.org.uk www.cre.gov.uk www.dataprotection.gov.uk www.drc-gb.org/ www.eoc.gov.uk www.health.ombudsman.org.uk www.mencap.org.uk www.mind.org.uk www.nspcc.org.uk www.radar.org.uk www.socialexclusionunit.gov.uk</p>