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**3.1 Well-being**

**What well-being means in the context of health and social care**

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| **3.1a Core knowledge learning outcomes for all workers** | **Evidence used**  | **Assessed by who and when** | **Signatures**  |
| What is meant by the term ‘well-being’ and why this is important |  |  |  |
| Factors that affect the well-being of **individuals** and **carers** |  |  |  |
| The importance of families, friends and community networks on the well-being of individuals and carers |  |  |  |
| Ways of working that support well-being |  |  |  |

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| **3.1b Additional AWIFHSC Learning Outcomes:****You are able to work in ways that:** | **Evidence used** | **Assessed by who and when** | **Signatures**  |
| Recognise the importance of families, friends and community networks and work in a way that supports and develops these relationships |  |  |  |
| Recognise what matters to individuals |  |  |  |

**3.2 Factors that impact upon health and well-being**

**Factors that impact upon the health and well-being of individuals**

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| **3.2a Core knowledge learning outcomes for all workers** | **Evidence used**  | **Assessed by who and when** | **Signatures**  |
| Human development and factors that can affect it |  |  |  |
| The range of **factors that may affect the health, well-being and development** of **individuals** and the impact this may have on them |  |  |  |
| The difference between the medical and social models of disability |  |  |  |
| What is meant by good physical health and good mental health and how these are interdependent |  |  |  |
| The impact of prolonged inactivity on physical and mental well-being |  |  |  |
| The social, mental and physical benefits of engagement in activities and experiences |  |  |  |
| The different ways that people can engage in a range of personal activities including the use of social media and technology |  |  |  |
| How engagement in the ‘Arts’ can support health and well-being |  |  |  |
| The meaning of the term ‘attachment’ and the impact that this can have on individuals in adulthood |  |  |  |
| The importance of self-identity, self-worth and sense of security and belonging for the health and well-being of individuals |  |  |  |
| How the way that individuals are supported will impact on how they feel about themselves |  |  |  |
| The range of health checks that individuals need to support their health and well-being |  |  |  |
| The range of services and information that support health promotion |  |  |  |
| The types of changes in an individual that would give cause for concern for their health and well-being |  |  |  |
| The importance of observing, monitoring and recording the health and well-being of individuals affected by particular health conditions |  |  |  |
| The importance of reporting concerns or any changes in the health and well-being of individuals |  |  |  |
| Links between health and well-being and safeguarding |  |  |  |
| Links between health and well-being and the Mental Capacity Act |  |  |  |

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| **3.2b Additional AWIFHSC Learning Outcomes:****You are able to work in ways that:** | **Evidence used** | **Assessed by who and when** | **Signatures**  |
| You know where to access further information or support related to the health and well-being of the individuals that you support |  |  |  |
| Take account of any specific factors that impact upon the health and well-being of the individuals that you work with |  |  |  |
| Support health promotion |  |  |  |

**3.3 Support for personal care and continence**

**How to support individuals with their personal care and continence management**

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| **3.3a Core knowledge learning outcomes for all workers** | **Evidence used** | **Assessed by who and when** | **Signatures**  |
| What is meant by the term 'personal care' |  |  |  |
| How to establish with an individual their preferences in relation to how they are supported with their personal care |  |  |  |
| How to protect the privacy and dignity of an individual when they are being supported with their personal care |  |  |  |
| What is meant by the term ‘continence’ |  |  |  |
| Factors that may contribute to difficulties with continence |  |  |  |
| How difficulties with continence can affect an individual’s self-esteem, health well-being and day to day activities |  |  |  |
| How an individual’s personal beliefs, sexual preference and values may affect the management of their continence |  |  |  |
| Aids and equipment that can support the management of continence |  |  |  |
| The range of professionals that may help with continence management |  |  |  |
| How to support individuals with their personal care and / or continence management in a way that protects both the individual and the **worker** supporting them |  |  |  |

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| **3.3b Additional AWIFHSC Learning Outcomes:****You are able to work in ways that:** | **Evidence used** | **Assessed by who and when** | **Signatures**  |
| Follow individuals’ **personal plans** when assisting them with their personal care and / or continence management |  |  |  |
| Follow **workplace** policies and procedures for the recording of information when supporting a person with management of their continence  |  |  |  |
| Follow workplace policies and procedures for infection prevention and control when supporting an individual with their personal care and continence management |  |  |  |

**3.4 Pressure area care**

**Good practice in relation to pressure area care**

| **3.4a Core knowledge learning outcomes for all workers** | **Evidence used** | **Assessed by who and when**  | **Signatures**  |
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| What is meant by the terms ‘pressure area care’, ‘pressure damage’ and ‘pressure ulcers’ |  |  |  |
| Legislation and national guidelines in relation to pressure damage |  |  |  |
| Factors that cause skin breakdown and pressure damage |  |  |  |
| Stages of pressure ulcer development |  |  |  |
| Common parts of the body for pressure damage |  |  |  |
| Interventions that can reduce the risk of skin breakdown and pressure damage |  |  |  |

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| **3.4b Additional AWIFHSC Learning Outcomes:****You are able to work in ways that:** | **Evidence used** | **Assessed by who and when**  | **Signatures**  |
| Follow individuals’ personal plans and risk assessment when assisting them with pressure area care |  |  |  |
| Follow workplace policies and procedures for infection prevention and control when supporting an individual with pressure area care |  |  |  |
| Follow workplace policies and procedures for reporting and recording any changes in skin condition including improvement or deterioration |  |  |  |

**3.5 Oral health care**

**How to support good oral health care and mouth care for individuals**

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| **3.5a** **Core knowledge learning outcomes for all workers** | **Evidence used** | **Assessed by who and when** | **Signatures** |
| What is meant by the terms ‘oral health care’ and ‘mouth care’ |  |  |  |
| National policy and practice guidance on oral health care |  |  |  |
| Common oral and dental problems in older people and other individuals who need care and support |  |  |  |
| Why oral health care and mouth care are important |  |  |  |
| The impact of poor oral health care and mouth care on health, well-being, self-esteem and dignity |  |  |  |
| Links between oral health care and mouth care and nutrition |  |  |  |
| The range of professionals that may help with oral health care |  |  |  |

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| **3.5b Additional AWIFHSC Learning Outcomes:****You are able to work in ways that:** | **Evidence used** | **Assessed by who and when**  | **Signatures**  |
| Follow individuals’ personal plans when assisting them with mouth care |  |  |  |
| Follow workplace policies for infection prevention and control when supporting individuals with mouth care |  |  |  |
| Follow workplace policies and procedures for recording and reporting any changes in the condition of the mouths of individuals |  |  |  |

**3.6 Foot Care**

**Supporting the health, well-being and development of individuals with additional support needs**

| **3.6a Core knowledge learning outcomes for all workers** | **Evidence used** | **Assessed by who and when**  | **Signatures**  |
| --- | --- | --- | --- |
| Why foot care is needed for individuals |  |  |  |
| Common conditions that can cause problems with feet |  |  |  |
| Signs of foot and toe nail abnormalities |  |  |  |
| The impact of foot conditions or abnormalities on the health and well-being of individuals |  |  |  |
| The range of professionals that may help with foot care |  |  |  |

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| **3.6b Additional AWIFHSC Learning Outcomes:****You are able to work in ways that:** | **Evidence used** | **Assessed by who and when**  | **Signatures**  |
| Follow individuals’ personal plans when assisting them with their foot care  |  |  |  |
| Follow workplace policies and procedures in the monitoring, recording and reporting of the feet condition of individuals |  |  |  |

**3.7 Administration of medication**

**Roles and responsibilities related to the administration of medication in social care settings**

| **3.7a Core knowledge learning outcomes for all workers** | **Evidence used** | **Assessed by who and when**  | **Signatures**  |
| --- | --- | --- | --- |
| Legislation and national guidance related to the administration of medication |  |  |  |
| The roles and responsibilities of those involved in: prescribing, dispensing and supporting the use of medication |  |  |  |
| Where responsibility lies for the use of ‘over the counter’ remedies and supplements in social care settings |  |  |  |
| Links between misadministration of medication and safeguarding |  |  |  |

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| **3.7b Additional AWIFHSC Learning Outcomes:****You are able to work in ways that:** | **Evidence used** | **Assessed by who and when**  | **Signatures**  |
| You are aware of what you can and cannot do in relation to the administration and use of medication at this stage of your training in the context of your role |  |  |  |
| Follow your workplace policies and procedures in support of the administration and use of medication |  |  |  |

**3.8 Nutrition and Hydration**

**The importance of nutrition and hydration for the health and well-being of individuals**

| **3.8a Core knowledge learning outcomes for all workers** | **Evidence used** | **Assessed by who and when**  | **Signatures**  |
| --- | --- | --- | --- |
| What is meant by the terms ‘nutrition’ and ‘hydration’ |  |  |  |
| The principles of a balanced diet and good hydration and government recommendations for a balanced diet and hydration |  |  |  |
| National and local initiatives that support nutrition and hydration |  |  |  |
| The importance of a balanced diet for the optimum health and well-being of individuals |  |  |  |
| **Factors that can affect nutrition and hydration** |  |  |  |

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| **3.8b Additional AWIFHSC Learning Outcomes:****You are able to work in ways that:** | **Evidence used** | **Assessed by who and when**  | **Signatures**  |
| Take account of any specific nutrition and hydration requirements for the individuals that you support |  |  |  |
| Follow workplace policies and procedures for monitoring and recording when supporting individuals with the management of their nutrition and hydration |  |  |  |

**3.9 Falls Prevention**

**How to support falls prevention**

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| **3.9a Core knowledge learning outcomes for all workers** | **Evidence used** | **Assessed by who and when** | **Signatures**  |
| **Factors that can contribute to falls** |  |  |  |
| How falls can be prevented |  |  |  |

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| **3.9b Additional AWIFHSC Learning Outcomes:****You are able to work in ways that:** | **Evidence used** | **Assessed by who and when**  | **Signatures**  |
| Minimise the factors that can contribute to falls |  |  |  |
| Follow workplace policies and procedures for the recording and reporting of any concerns about factors that may lead to falls |  |  |  |

**3.10 End of life care**

**Factors that affect end of life care**

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| **3.10a Core knowledge learning outcomes for all workers** | **Evidence used** | **Assessed by who and when** | **Signatures**  |
| How death and dying, grief and mourning may impact on individuals and key people in their lives |  |  |  |
| How culture, religion and personal beliefs will impact upon approach to death and dying |  |  |  |
| What is meant by the terms ‘advanced care planning’ and ‘advanced directives’ and why these are important |  |  |  |
| The range of support that is available to support individuals with end of life care |  |  |  |
| The range of assistance that is available for workers when supporting individuals with end of life care |  |  |  |

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| **3.10b Additional AWIFHSC Learning Outcomes:****You are able to work in ways that:** | **Evidence used** | **Assessed by who and when** | **Signatures**  |
| Follow workplace policies and procedures when supporting individuals with end of life care |  |  |  |

**3.11 Assistive Technology**

**How Assistive Technology can be used to support the health and well-being of individuals**

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| **3.11a Core knowledge learning outcomes for all workers** | **Evidence used** | **Assessed by who and when** | **Signatures**  |
| What is meant by the terms ‘assistive technology’ and ‘electronic assistive technology’ |  |  |  |
| The types and range of technological aids that can be used to support an individual’s independence and how these can be accessed |  |  |  |
| How technological aids can be used to support **active participation** |  |  |  |
| The range of support that is available for the use of assistive technology |  |  |  |

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| **3.11b Additional AWIFHSC Learning Outcomes:****You are able to work in ways that:** | **Evidence used** | **Assessed by who and when** | **Signatures**  |
| Follow workplace policies and procedures for the use of assistive technology |  |  |  |

**3.12 Sensory Loss**

**How sensory loss can impact upon the health and well-being of individuals**

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| **3.12a Core knowledge learning outcomes for all workers** | **Evidence used** | **Assessed by who and when** | **Signatures**  |
| What is meant by the term ‘sensory loss’ |  |  |  |
| The causes and conditions of sensory loss |  |  |  |
| Indicators and signs of sensory loss |  |  |  |
| Factors that impact upon an individual with sensory loss |  |  |  |
| What needs to be considered when communicating with an individual with: sight loss; hearing loss; Deafblindness |  |  |  |
| The importance of supporting individuals to use aids such as hearing aids and glasses |  |  |  |
| What needs to be considered when supporting an individual with: loss of taste; smell or touch |  |  |  |
| The range of support that is available for individuals with sensory loss |  |  |  |

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| **3.12b Additional AWIFHSC Learning Outcomes:****You are able to work in ways that:** | **Evidence used** | **Assessed by who and when** | **Signatures**  |
| Take account of sensory loss support requirements  |  |  |  |

**3.13 Dementia**

**How living with dementia can impact on the health and well-being of individuals**

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| **3.13a Core knowledge learning outcomes for all workers** | **Evidence used** | **Assessed by who and when** | **Signatures**  |
| What is meant by the term ‘dementia’  |  |  |  |
| Indicators and signs of dementia |  |  |  |
| The ways dementia can affect individuals and how they experience the world |  |  |  |
| What is meant by ‘living well with dementia’ |  |  |  |
| How person centred approaches can be used to support individuals living with dementia |  |  |  |
| What needs to be considered when communicating with an individual living with dementia  |  |  |  |
| The impact supporting and caring for an individual living with dementia, can have on family / carers  |  |  |  |
| Ways that carers can be supported to continue in their role |  |  |  |
| What is meant by a ‘dementia friendly community’ and how this can contribute to the well-being of individuals living with dementia |  |  |  |
| The range of support that is available for individuals living with dementia |  |  |  |

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| **3.13b Additional AWIFHSC Learning Outcomes:****You are able to work in ways that:** | **Evidence used** | **Assessed by who and when** | **Signatures**  |
| Support individuals that you work with to live well with dementia |  |  |  |

**3.14 Mental health**

**How mental ill-health can impact upon the health and well-being of individuals**

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| **3.14a Core knowledge learning outcomes for all workers** | **Evidence used** | **Assessed by who and when** | **Signatures**  |
| What is meant by the term ‘mental ill-health’ |  |  |  |
| Factors that can contribute or lead to mental ill-health |  |  |  |
| Indicators and signs of mental illness |  |  |  |
| The potential impact of mental ill-health on health and well-being |  |  |  |
| Ways in which individuals can be supported to live well with mental ill-health |  |  |  |
| Positive outcomes associated with improved mental health and well-being |  |  |  |
| The range of support that is available to help individuals with mental ill-health |  |  |  |

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| **3.14b Additional AWIFHSC Learning Outcomes:****You are able to work in ways that:** | **Evidence used** | **Assessed by who and when** | **Signatures**  |
| Support individuals to live well with mental ill-health |  |  |  |

**3.15 Substance misuse**

**How substance misuse can impact upon the health and well-being of individuals**

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| **3.15a Core knowledge learning outcomes for all workers** | **Evidence used** | **Assessed by who and when** | **Signatures**  |
| What is meant by the term ‘substance misuse’ |  |  |  |
| Indicators and signs of substance misuse |  |  |  |
| The potential impact of substance misuse on the health and well-being of individuals |  |  |  |
| The range of support that is available to individuals who misuse substances |  |  |  |