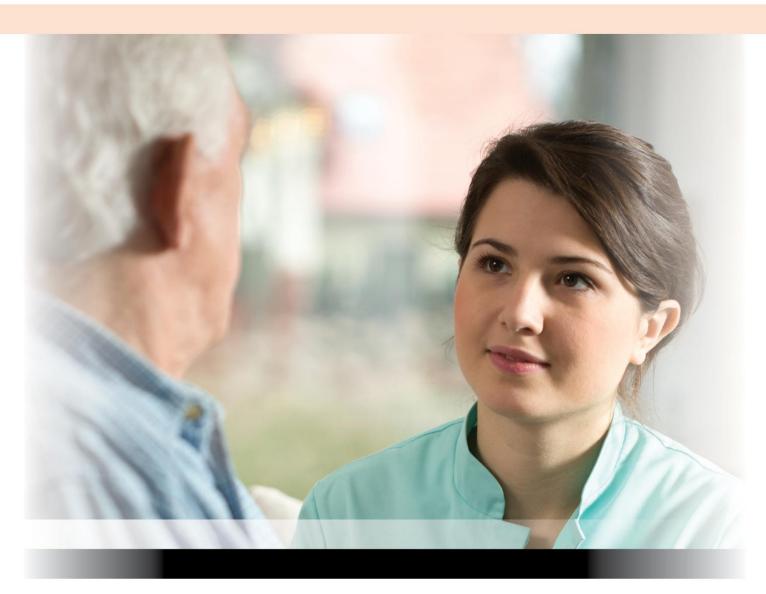


Highfield Level 2 End-Point Assessment for ST0216 Healthcare Support Worker

End-Point Assessment Kit



Highfield Level 2 End-Point Assessment for Healthcare Support Worker

EPA-Kit

Contents

Please click on the headings below to navigate to the associated section of the EPA kit.

Introduction	5
The Highfield Approach	13
Gateway	15
The Healthcare Support Worker Apprenticeship Standard	17
Assessment Summary	60
Assessing the Multiple-Choice Test	63
Assessing the Practical Observation	75
Assessing the Evidence Portfolio and Interview	80

How to Use this EPA Kit

Welcome to the Highfield End-Point Assessment Kit for the Healthcare Support Worker Apprenticeship Standard.

Highfield is an independent end-point assessment organisation that has been approved to offer and carry out the independent end-point assessments for the Level 2 Healthcare Support Worker Apprenticeship Standard. Highfield internally quality assures all end-point assessments in accordance with its IQA process, and additionally, all end-point assessments are externally quality assured by the relevant EQA organisation.

The EPA kit is designed to outline all you need to know about the end-point assessments for this standard and will also provide an overview of the on-programme delivery requirements. In addition, advice and guidance for trainers on how to prepare apprentices for the end-point assessment is included. The approaches suggested are not the only way in which an apprentice may be prepared for their assessments, but trainers may find them helpful as a starting point.

Highfield also offers the Highfield Healthcare Support Worker Apprenti-kit that is a comprehensive learning resource, which is designed to be used on-programme.

For more information, please go to the Highfield Products website. Please note that the use of this kit is not a prerequisite for apprentices undertaking the Healthcare Support Worker end-point assessment.

Key facts

Apprenticeship standard: Healthcare Support Worker

Level: 2

On Programme Duration: Minimum of 12 months
Grading: Pass/merit/distinction
End-Point Assessment methods: Multiple-choice test,

Evidence portfolio and interview

Observation of practice,



In this kit, you will find:

- an overview of the standard and any on-programme requirements
- a section focused on delivery, where the standard and assessment criteria are presented in a suggested format that is suitable for delivery
- guidance on how to prepare the apprentice for gateway
- detailed information on which part of the standard is assessed by which assessment method
- suggestions on how to prepare the apprentice for each part of the end-point assessment
- a section focused on the end-point assessment method where the assessment criteria are presented in a format suitable for carrying out 'mock' assessments



Introduction

Standard overview

Healthcare support workers (HCSWs) work as part of a team providing high-quality and compassionate care to individuals. HCSWs carry out well-defined routine clinical duties like monitoring an individual's conditions (by checking things like blood pressure, temperature or weight), checking on their overall progress, comfort and wellbeing. Depending on where the HCSWs work, they may also help them to eat, drink, wash, dress or go to the toilet. HCSWs will prepare individuals for healthcare activities carried out by other members of the healthcare team, looking after them before, during and/or after those activities in line with their care plan. HCSW's will also carry out non-clinical duties and, depending on where they work, this could include things like keeping records, making beds, tidying up their work area, returning or cleaning the equipment used during a clinical activity. HCSWs will be able to address straightforward problems in their day-to-day work, reporting concerns and changes to the appropriate person in a timely manner. HCSWs work in a range of healthcare settings and their team may include workers from both health and social care. HCSWs will report to a registered healthcare practitioner who will directly or indirectly supervise their work.

On-programme requirements

Apprentices typically take 12 months to complete this apprenticeship and although learning, development and on-programme assessment are flexible, and the process is not prescribed, the following is the recommended baseline expectation for an apprentice to achieve full competence in line with the Healthcare Support Worker Apprenticeship Standard.

The on-programme assessment approach will be agreed between the training provider and employer. The assessment will give an ongoing indication of an apprentice's performance against the final outcomes defined in the standard. The training provider will need to prepare the apprentice for the end-point assessment, including preparation for the multiple-choice test, observation of practice, evidence portfolio and interview.

The training programme leading to end-point assessment should cover the breadth and depth of the standard using suggested on-programme assessment methods that integrate the knowledge, skills and behaviour components, and which ensure that the apprentice is sufficiently prepared to undertake the end-point assessment. Training, development and on-going review activities should include:



- induction which is specific to their workplace and at a minimum meets the 15 standards required by the Care Quality Commission (as set out in the Care Certificate).
- achievement of level 1 English and maths. If the apprentice began their apprenticeship training before their 19th birthday, they will still be subject to the mandatory requirement to study towards and achieve English and maths. The requirements for English and maths are optional for apprentices aged 19+ at the start of their apprenticeship training.
- any qualifications specified by the employer.
- completion of a portfolio through which the apprentice gathers evidence of their progress.
- study days and training courses.
- mentoring/buddy support.
- regular performance reviews undertaken by the employer.
- structured one to one reviews of their progress with their employer and/or training provider.

Throughout the period of learning and development, and at least every 2 months, the apprentice should meet with the on-programme assessor to record their progress against the standard. At these reviews, evidence should be discussed and recorded by the apprentice. The maintenance of an on-programme record is important to support the apprentice, on-programme assessor and employer in monitoring the progress of learning and development and to determine when the apprentice has achieved full competence in their job role and is therefore ready for end-point assessment.

Evidence Portfolio

The evidence portfolio is one aspect of the 'evidence portfolio and interview' assessment component. The evidence portfolio is assessed by the end-point assessor prior to the interview. It is important to note that the evidence portfolio and interview are assessed holistically (assessment of the evidence portfolio will contribute to the overall final grade awarded for the portfolio and interview assessment method). More information relating to the interview can be found within the 'assessing the evidence portfolio and interview' section below.

The evidence portfolio consists of at least 1 direct observation as its main source of evidence and includes at least 2 reflective accounts which demonstrate the apprentices learning and application of skills, values and behaviours and their ability to relate concepts and theories to practice. The apprentice may include other types/sources of evidence in their portfolio (required to achieve a distinction). Apprentices should be confident that their portfolio contains all required sources of evidence and reflective



accounts (guidance provided below) and is clearly mapped to the standard in order for it to be assessed by the end-point assessor prior to the interview. The reflective accounts and other supporting evidence submitted, including the direct observation, can be utilised from any point of the on-programme learning. Both form the portfolio and this **must** be collated in the **final 3 months** of the apprenticeship prior to gateway. The highest-quality evidence is most likely to be generated towards the end of the on-programme period.

Apprentices should be confident that their portfolio contains reflective accounts and direct observation that include the requirements outlined below which will be assessed by the end-point assessor prior to the interview.

What is included in the portfolio?

Below is a list of standard areas that the apprentice should include in the portfolio. For apprentices that do not evidence the full range of skills, values and behaviours for the portfolio, assessors will plan to ask the apprentice questions that are likely to give the apprentice the opportunity to provide further evidence for these areas during the interview. The final decision on this component is then a holistic judgement made by the assessor.

The following areas of the standard must be covered:

- Communication
- Health interventions
- Dementia, cognitive issues, mental health
- Basic life support
- Physiological measurements
- Personal and people development
- Health, safety and security
- Infection, prevention and control
- Moving and handling
- Be caring
- Be compassionate
- Be honest
- Be conscientious
- Be committed
- Treating people with dignity, respecting individual's diversity, beliefs, culture, values, needs, privacy and preferences
- Show respect and empathy for those you work with
- Have the courage to challenge areas of concern and work to best practice
- Being adaptable, reliable and consistent



- Showing discretion towards others
- Show self-awareness
- Show resilience

The portfolio **must** include:

- at least 1 direct observation in the workplace as the primary source of evidence.
 Observations should be undertaken by the on-programme assessor and/or employer and/or expert witnesses (direct observation record template provided in on the Highfield Assessment website)
- at least 2 reflective accounts completed by the apprentice that demonstrate their learning and application of selected skills development, as well as their approach to the workplace i.e. values (being caring and compassionate, honest, conscientious and committed) and behaviours (resilience must be included) (reflection template provided on the Highfield Assessment website).

Further guidance and requirements for producing the evidence portfolio

- The reflective accounts must demonstrate the ability to relate concepts and theories to current and future practice (required to pass)
 - Concepts and theories could be from evidence-based practice, journal articles, Nursing and Midwifery Council research, Health and Care Professions Council, NICE research and recommendations, NHS Guidelines, etc.
 - Reference to concepts and theories should be used to support reflections and assist with identifying the principles that underpin practice.
- The reflective accounts are recommended to include a brief introduction, main body (relating concepts and theories to current and future practice) and brief conclusion within each section.
- The portfolio may include other sources of evidence (a minimum of 2 to achieve a distinction) for example, structured performance reviews between employer and apprentice, feedback from line manager, direct reports and peer observations, personal development planning, project plans/other work plans, data analysis activities, case studies, team meeting minutes, evidence of study days and training courses attended, evidence of mentoring or buddy support, testimonies from individuals who use services and/or their carers, etc.
- The portfolio **must** be mapped fully and clearly to the standard using the portfolio matrix sheet.
- The portfolio must be accompanied by a Portfolio Matrix sheet. It is available to
 download from the Highfield Assessment website and should be used to map the



- apprentice's portfolio of evidence to the Healthcare Support Workers standards and accompany the portfolio when submitted to Highfield Assessment.
- The portfolio **must** be made available at Gateway. Written submissions may be provided to Highfield in any approved format (listed on the matrix sheet) and uploaded to the apprentice's Dropbox folder.

Mapping to skills, values and behaviours

Highfield provides the following examples of 2 different ways to produce reflections and map them to the standard. Please use these as a guide.

_		
	Example 1 During a night shift, I was supporting an individual who has an end of their life care plan in place. The patient's pain was being managed by intravenous medication. When undertaking routine checks during my shift, I could see that his facial expression seemed distressed, his body language was tense and uncomfortable, I thought that he was perhaps showing signs of increased pain. I immediately reported my concerns to the manager on duty and the nurse-in-charge was asked to review the patient's pain medication. I was asked to support the nurse with this task. I made sure that I knew which communication method to use to support the patient by firstly checking their care plan. The individual wasn't able to communicate verbally but was able to understand my verbal communication and could nod or shake his head in response to my questions. I washed my hand's in preparation to support the patient and asked for the patient's consent to undertake his temperature, pulse, breathing rate and blood pressure. He nodded and therefore I used a thermometer to take the patient's temperature.	(EPI2.2) (EPI2.7)
	During a night shift, I was supporting an individual who has an end of their life care plan in place. The patient's pain was being managed by intravenous medication. When undertaking routine checks during my shift, I could see that his facial expression seemed distressed, his body language was tense and uncomfortable, I thought that he was perhaps showing signs of increased pain (EPI2.2). I immediately reported my concerns to the manager on duty and the nurse-in-charge was asked to review the patient's pain medication (EPI2.7). I was asked to support the nurse with this task. I made sure that I knew which communication method to use to support the patient by firstly checking their care plan. The individual wasn't able to communicate verbally but was able to understand my verbal communication and could nod or shake his head in response to my questions. I washed my hand's in preparation to support the patient and asked for the patient's consent to undertake his	

temperature, pulse, breathing rate and blood pressure. He nodded and therefore I used a thermometer to take the patient's temperature (EPI2.12).



Readiness for end-point assessment

In order for an apprentice to be ready for the end-point assessments:

- the apprentice must meet the 15 standards required by the Care Quality Commission (as set out in the Care Certificate).
- the apprentice must have achieved Level 1 maths and English. The requirements for English and maths are mandatory for all apprentices aged between 16-18 at the start of their apprenticeship training. The requirements for English and maths are optional for apprentices aged 19+ at the start of their apprenticeship training.
- the apprentice must have completed an evidence portfolio. The reflective accounts must be written in the final 3 months of the apprenticeship prior to gateway. Other supporting evidence submitted, including the direct observation, can be utilised from any point of the on-programme learning. The highest quality of evidence is most likely to be generated towards the end of the on-programme period.
- the line manager (employer) must be confident that the apprentice has developed all the knowledge, skills and behaviours defined in the apprenticeship standard and that the apprentice is competent in performing their role. To ensure this, the apprentice must attend a formal meeting with their employer to complete the gateway readiness report.
- the apprentice and the employer should then engage with Highfield to agree a plan and schedule for each assessment activity to ensure all components can be completed within the assessment window. The assessment plan does not specify an assessment window for this standard. Highfield suggests a 3-month assessment window that starts from the attempt of the first activity. Further information about the gateway process is covered later in this kit.



Order of end-point assessments

The evidence portfolio and interview must follow the practical observation, so that the apprentice can carry over assessment to the interview if required:

- Multiple-choice test (60 minutes)
- Practical observation (90 minutes, recommended maximum of 120 minutes)
- Evidence portfolio and interview (maximum 60 minutes)

For final certification, the apprentice must have passed all components of the end-point assessment.

Click here to return to contents



The Highfield Approach

This section describes the approach Highfield has adopted in the development of this endpoint assessment in terms of its interpretation of the requirements of the end-point assessment plan and other relevant documents.

Documents used in developing this end-point assessment

Standard (ST0216)

Healthcare support worker / Institute for Apprenticeships and Technical Education

End-point assessment plan (ST0216/AP01)

healthcare support worker assessment.pdf (instituteforapprenticeships.org)

Specific considerations

In order to develop valid assessments, and to avoid assessing learners more than once for any part of the standard, Highfield has interpreted the requirements of the Healthcare Worker assessment plan as follows:

- all knowledge parts of the standard are assessed via the multiple-choice test
- skills, values and behaviours within the standard are assessed through the observation of practice, evidence portfolio and interview

The indicative assessment criteria have been created by Highfield Assessment and are provided to support learners in preparation for their multiple-choice test. This is provided as further guidance to support the apprentice in preparation for end-point assessment.

Observation of Practice

The assessment plan states that the observation of practice lasts a <u>minimum</u> of 90 minutes and therefore Highfield Assessment has provided a recommended maximum of 120 minutes for the observation of practice. This is recommended to ensure a consistent and fair approach to the assessment of apprentices.

Highfield has suggested that during the observation of practice simulation may be required to ensure all emboldened criteria can be covered. Assessment criteria that may require simulation are listed in 'Assessing the Practical Observation'.

Evidence Portfolio and Interview

The evidence portfolio and interview assessment method does not assess knowledge, as this is assessed by the multiple-choice test. Consequently, during the interview, the Independent End-Point Assessor will not review the test result in order to select the areas they wish to explore with the apprentice.



The pass criteria for this component are taken from the criteria outlined on page 9-10 of the assessment plan. The grading paragraphs on page 9-10 of the assessment plan have been used to write a set of pass, merit and distinction criteria. This is to provide clear information on what is expected of apprentices to achieve higher than a pass grade for the evidence portfolio and interview.

Click here to return to contents

Gateway

How to prepare for gateway

After apprentices have completed their on-programme learning, they should be ready to pass through 'gateway' to their end-point assessment.

Gateway is a meeting that should be arranged between the apprentice, their employer and training provider to determine that the apprentice is ready to undertake their endpoint assessment. The apprentice should prepare for this meeting by bringing along workbased evidence, including:

- customer feedback
- recordings
- manager statements
- witness statements

As well as evidence from others, such as:

- mid and end-of-year performance reviews
- feedback to show how they have met the apprenticeship standards while onprogramme

In advance of gateway, apprentices will need to have completed the following. The requirements for English and maths listed below are mandatory for all apprentices aged between 16-18 at the start of their apprenticeship training. The requirements for English and maths listed below are optional for apprentices aged 19+ at the start of their apprenticeship training.

- Achieved level 1 English
- Achieved level 1 maths
- Meet the 15 standards required by the Care Quality Commission (as set out in the Care Certificate)
- Have completed an evidence portfolio

Therefore, apprentices should be advised by employers and providers to gather this evidence and undertake any qualifications during their on-programme training. It is recommended that employers and providers complete regular checks and reviews of this evidence to ensure the apprentice is progressing and achieving the standards before the formal gateway meeting is arranged.



The gateway meeting

The gateway meeting should last around an hour and must be completed on or after the apprenticeship on-programme end date. It should be attended by the apprentice and the relevant people who have worked with the apprentice on-programme, such as the line manager/employer or mentor, the on-programme trainer/training provider and/or a senior manager (as appropriate to the business).

During the meeting, the apprentice, employer and training provider will discuss the apprentice's progress to date and confirm if the apprentice has met the full criteria of the apprenticeship standard during their on-programme training. The **Gateway Readiness Report** should be used to log the outcomes of the meeting and agreed by all 3 parties. This report is available to download from the Highfield Assessment website.

The report should then be submitted to Highfield to initiate the end-point assessment process. If you require any support completing the Gateway Readiness Report, please contact your Employer Engagement Manager at Highfield Assessment.

Please note: a copy of the standard should be available to all attendees during the gateway meeting.

Reasonable adjustments and special considerations

Highfield Assessment has measures in place for apprentices who require additional support. Please refer to the Highfield Assessment Reasonable Adjustments Policy for further information/guidance.

ID requirements

Highfield Assessment will need to ensure that the person undertaking an assessment is indeed the person they are claiming to be. All employers are therefore required to ensure that each apprentice has their identification with them on the day of the assessment so the end-point assessor can check.

Highfield Assessment will accept the following as proof of an apprentice's identity:

- a valid passport (any nationality)
- a signed UK photocard driving licence
- a valid warrant card issued by HM forces or the police
- another photographic ID card, e.g. employee ID card, travel card, etc.

Click here to return to contents



The Healthcare Support Worker Apprenticeship Standard

The following pages contain the healthcare support worker apprenticeship standard and the assessment criteria in a format that is suitable for delivery.

Communication		
Multiple Choice Test		
The apprentice will know and understand	Indicative assessment criteria	
C1.1 Why it is important to communicate effectively at work C1.2 How to communicate with individuals that have specific language needs or wishes C1.3 Ways to make yourself understood C1.4 How to reduce problems with communication	 Identify reasons why people communicate at work Explain how effective communication affects aspects of work in healthcare settings Explain the benefits of observing an individual's reactions when communicating with them Explain why it is important to find out an individual's specific language needs or wishes Describe methods to use when communicating with individuals who have specific language needs or wishes Identify communication problems Describe ways to reduce communication problems and make 	
C2.1 Legislation, policies and local ways of working about handling information	 yourself understood Describe ways to check that communication has been understood Identify sources of information and support or services to enable more effective communication Identify legislation relating to the handling of information Explain policies relating to the handling of information 	



C2.2 How to keep information confidential

C2.3 Why it is important to record and store patient information securely and what to do if you think information is not secure

- Explain the impact of local ways of working on the handling of information
- Define the term 'confidentiality'
- Describe ways of handling confidential information securely
- Describe situations where information normally considered to be confidential might need to be shared with agreed others
- Identify types of patient information which are stored securely
- Explain why the security of patient information is important
- Explain how and when to seek advice about the security of information

Observation of practice

Pass assessment criteria

OB1/OB1.2 Communicate effectively with individuals, their families, carers and healthcare practitioners using a range of techniques, keeping information confidential

OB2.1/OB2.2 Handle information (record, report and store information) related to individuals in line with local and national policies

Evidence portfolio and interview

Pass assessment criteria

EPI1.1Communicate effectively with individuals, their families, carers and healthcare practitioners using a range of techniques, keeping information confidential

EPI1.2 Handle information (record, report and store information) related to individuals in line with local and national policies

Amplification and Guidance

Healthcare settings may include:

Hospitals



- Community clinics
- Health centres
- Individuals' homes
- Nursing/care homes
- Hospices
- Mental health settings
- GP surgeries

Individuals are those requiring care and support, may include patients, service users or clients

Legislation, policies and local ways of working could include:

- General Data Protection Regulations
- Data Protection Act
- Health and Social Care Act
- Information Governance policy
- Health and Safety legislation
- Organisational policies and procedures
- Formally agreed guidance on how to carry out tasks in your workplace
- Less formally agreed ways of working
- Less formally documented by individual employers and the self-employed or formal policies

This list is not exhaustive



Health Intervention		
Multiple Choice Test		
The apprentice will know and understand	Indicative assessment criteria	
HI1.1 How to do routine clinical tasks delegated from a registered nurse or other healthcare professional	 Describe how to do a range of routine clinical tasks Explain the importance of staying within limits of own competence and authority when performing routine clinical tasks 	
HI2.1 The signs and symptoms of a person who is experiencing pain or discomfort	 Describe causes of different types of pain or discomfort List the signs and symptoms of different types of pain or discomfort 	
HI3.1 How to promote a person's physical health and wellbeing	 Explain how individual identity and self-esteem are linked with health, comfort and wellbeing Describe attitudes and approaches that are likely to promote an individual's health and well-being 	
HI4.1 How to support a person's comfort and wellbeing	 Describe methods of supporting a person's comfort and wellbeing Identify ways to contribute to an environment that promotes health, comfort and wellbeing 	
HI5.1 The importance of hydration, nutrition and food safety	 Explain the importance of hydration and nutrition in maintaining health and wellbeing Explain the importance of food safety procedures, risk assessment, safe handling and behaviour Explain how to promote hydration, nutrition and food safety in a healthcare setting 	
HI6.1 What the activities of daily living are and which ones you are expected to support in your role	 Describe a range of activities of daily living relevant to healthcare Describe how own role fits within supporting activities of daily living 	



HI7.1 The signs of a person whose health and wellbeing is deteriorating; HI7.2 How to report changes and deterioration	 Explain the importance of staying within limits of own competence and authority when supporting activities of daily living Describe signs that may indicate a person's health or wellbeing are deteriorating Explain the importance of recognising that deterioration in health or wellbeing may occur without clear signs Explain the process for reporting deterioration in health or wellbeing 	
Evidence	portfolio and interview	
Pass assessment criteria		
EPI2.1 Support individuals with long term conditions, frailty and end of life care		
EPI2.2 Identify and respond to signs of pain or discomfort		
EPI2.3 Promote physical health and wellbeing of individuals		
EPI2.4 Assist with an individuals' overall comfort and wellbeing		
EPI2.5 Support individuals with activities of daily living		
EPI2.6 Recognise deteriorations in health, long term conditions, physiological measurements, skin integrity		
EPI2.7 Report changes in physical and mental health needs		
Amplification and Guidance		
Routine clinical tasks may include:		
checking blood pressure		
checking temperature abouting a variable sets.		
 checking weight, etc. 		



Approaches:

- treat a person as an individual and respect their decisions/wishes
- enable an individual to participate in their care if they wish
- gain consent prior to each procedure/activity
- stay within the parameters of your professional boundaries

Methods:

- carry out routine clinical tasks under instruction from a senior colleague
- only use regularly checked and calibrated equipment
- follow policy and procedures
- report findings back to your senior colleague/line manager/mentor

Healthcare settings may include:

- Hospitals
- Community clinics
- Health centres
- Individuals' homes
- Nursing/care homes
- Hospices
- Mental health settings
- GP surgeries

Activities of daily living may include:

- feeding oneself
- drinking
- bathing/washing
- toileting



- dressing
- grooming
- work
- homemaking
- leisure



Person-centred care and support		
Multiple Choice Test		
The apprentice will know and understand	Indicative assessment criteria	
PC1.1 What it means to give 'person-centred care and support' PC1.2 Why it is important to get consent, even when it is difficult PC1.3 Why it is important to get people actively involved in their own care PC1.4 Why it is important to give people choices about their care PC1.5 Why treating people as valuable and unique individuals makes a big difference in how they feel	 Define 'person-centred care and support' List person-centred values Explain the relationship between person-centred care and support and own responsibilities as a healthcare support worker Define the term 'consent' Explain the importance of gaining consent Describe how to establish consent for an activity or action Explain what steps to take if consent cannot be readily established Define what is meant by 'active participation' Describe how active participation benefits an individual Explain ways of encouraging active participation Describe ways of reducing barriers to active participation Identify ways of supporting an individual to make informed choices Explain why risk-taking can be part of an individual's right to make choices Explain how agreed risk assessment processes are used to support the right to make choices Explain why a worker's personal views should not influence an individual's choices Describe how to support an individual to question or challenge decisions concerning them that are made by others Describe how to treat people as valuable and unique individuals Explain the benefits to wellbeing of treating people as valuable unique 	



Observation of practice

Pass assessment criteria

OB3.1 Demonstrate person-centred care and support

Amplification and Guidance

Person-centred care and support refer to viewing the people using health and social services as equal partners in planning, developing and monitoring care to make sure it meets their needs; considering a person's desires, values, family situations, social circumstances and lifestyles; seeing the person as an individual and working together to develop appropriate solutions.

Person-centred values include:

- individuality
- rights
- choice
- privacy
- independence
- dignity
- respect
- care
- compassion
- courage
- communication
- competence
- partnership

Consent means an informed agreement to an action or decision; the process of establishing consent will vary according to an individual's assessed capacity to consent. Consent may be implied, written, or verbal.



Active participation is a way of working that recognises an individual's right to participate in the activities and relationships of everyday life as independently as possible; the individual is regarded as an active partner in their own care or support, rather than a passive recipient.

Wellbeing may include aspects that are:

- social
- emotional
- cultural
- spiritual
- intellectual
- economic
- physical
- mental



Dementia, cognitive issues and mental health		
Multiple Choice Test		
The apprentice will know and understand	Indicative assessment criteria	
DM1.1 The main forms of mental ill health and their impact on people's lives DM1.2 How to promote mental health and wellbeing	 Identify the main forms of mental ill health Describe the symptoms associated with the main forms of mental ill health Explain how mental ill health impacts uniquely on people's lives Explain the importance of mental health and wellbeing Describe ways to promote positive mental health and wellbeing in healthcare settings 	
DM2.1 The possible signs of limitations in mental capacity and what to do when you notice them	 Define the term 'mental capacity' List possible signs of limitations in mental capacity Explain actions to take when possible signs of limitations in mental capacity are noticed Explain the importance of staying within limits of own competence and authority when identifying and acting upon signs of limitations in mental capacity 	
DM3.1 The possible signs of mental health, dementia and learning disability in people	 Describe possible signs of mental health, dementia and learning disabilities in people Explain the process of reporting possible signs of mental health, 	
DM3.2 Why depression, delirium and the normal ageing process may be mistaken for dementia	 dementia or learning disabilities within agreed ways of working Compare the symptoms of depression, delirium and the normal ageing process with the symptoms of dementia 	
DM3.3 The importance of early diagnosis in relation to dementia and other cognitive issues	 Explain why depression, delirium and the normal ageing process may be mistaken for dementia 	



DM4.1 How to report changes or deterioration	 Explain the importance of staying within limits of own competence and authority when identifying symptoms of dementia Describe ways in which dementia and other cognitive issues are diagnosed Explain the consequences of failing to diagnose dementia and other cognitive issues at an early stage Describe changes or deterioration which can occur to someone's mental health, dementia or cognitive issues Explain how to report changes or deterioration Explain the importance of reporting changes or deterioration 	
Evi	dence portfolio and interview	
Pass assessment criteria		
EPI2.8 Promote mental and physical health and wellbeing		
EPI2.9 Recognise limitations in mental capacity and respond appropriately		
EPI2.10 Recognise and respond to signs of poor mental health for example dementia, depression, anxiety or other cognitive issues		
, and the second	Amplification and Guidance	
Main forms of mental ill health may include:		
• dementia		
mood disorders – e.g. depression		
personality disorders		
 psychotic disorders substance-related disorders 		
eating disorders		



anxiety disorders

Ways to promote could include:

- tailoring patient's/client's/individuals needs and preferences
- involving patient's/client's/individuals and if appropriate families and carers in their care and treatment
- using effective communication
- giving appropriate information in a way the individual understands
- gaining consent prior to each activity/procedure
- consider culture, mental capacity, physical, sensory or learning disabilities and individuals who do not speak or write English
- focus on wellness and what can be achieved rather than what cannot

Healthcare settings may include:

- Hospitals
- Community clinics
- Health centres
- Individuals' homes
- Nursing/care homes
- Hospices
- Mental health settings
- GP surgeries

Mental capacity refers to the ability of someone to make their own decisions and should make reference to the Mental Capacity Act

Agreed ways of working refer to organisational policies and procedures. This includes those less formally documented by individual employers and the self-employed or formal policies.



Basic life support		
Multiple Choice Test		
The apprentice will know and understand	Indicative assessment criteria	
BL1.1 How to perform basic life support	 Define the term 'basic life support' Describe situations in which it would be necessary to perform basic life support in healthcare settings Describe resuscitation techniques and equipment used to perform basic life support Explain the importance of staying within limits of own competence and authority when performing basic life support 	
Evidence portfolio and interview		
Pass Assessment Criteria		
EPI2.11 Perform basic life support for individuals using appropriate resuscitation techniques and equipment in a simulated situation		
Amplification and Guidance		
Basic life support refers to a variety of non-invasive emergency procedures performed to assist in the immediate survival of a patient, including cardiopulmonary resuscitation, haemorrhage control, stabilisation of fractures, spinal immobilisation and basic first aid		



Physiological Measurements	
Multiple Choice Test	
The apprentice will know and understand	Indicative assessment criteria
PM1.1 The range of physiological states that can be measured including body temperature, weight, height, blood pressure, pulse and breathing rate	 Define 'physiological state' Identify the types of measurement which can be used to determine physiological state Explain how to take measurements
PM2.1 The normal range of physiological measurements	 Explain the normal range of physiological measurements Explain the importance of the normal range of physiological measurements
Evidence portfolio and interview	

Pass Assessment Criteria

EPI2.12. Undertake a range of physiological measurements using the appropriate equipment including height, weight, temperature, pulse, breathing rate and blood pressure

Amplification and Guidance

Physiological state refers to the condition or state of the body or bodily functions

Types of measure could include body temperature, weight, height, blood pressure, pulse and breathing rate

Normal range of physiological measurements in an adult e.g.:

- body temperature 37°C
- normal Blood pressure in the range of 120/80mmHg 140/90mmHg. This may vary dependent on age and other contributing factors. Readings should be reported for risk assessment



- pulse rate range 60 100 beats per minute. This may vary dependent on disease and other contributing factors. Readings should be reported for risk assessment
- breathing rate 12 20 breathes per minute. This may vary dependent on age and other contributing factors. Readings should be reported for risk assessment
- a BMI weight of 18.5 24.9 is considered a healthy range in adults. This will vary dependent on age and other contributing factors. Readings should be reported for risk assessment



Personal and People development		
Multiple Choice Test		
The apprentice will know and understand	Indicative assessment criteria	
PP1.1 Your role and the responsibilities and duties of your job PP1.2 Why it is important to work in ways that have been agreed by your employer and to follow standards/codes of conduct	 Describe tasks and responsibilities of own role Outline how own role fits within the structure and context of the organisation Outline limits of responsibility based on own training and expertise Identify statutory standards that influence own role Describe how statutory standards and codes of practice influence own role 	
PP2.1 Working relationships and the importance of working well with other people PP2.2 Who or where to go for help and support about anything related to your work	 Describe the importance of professional boundaries in healthcare Explain how a professional relationship is different from a personal relationship Compare the differences between professional relationships with individuals and others Define the term co-production Explain the importance of working in partnership with individuals and others Give examples of how to work in partnership with individuals and others in the interests of the individual being supported Identify areas of your work when help and support may be needed Identify sources of help and support for areas of your own work 	



PP3.1 The importance of personal development and how to reflect on your work	Explain how to use feedback from individuals and others to support own learning and development	
PP3.2 How to create a personal development plan	 Explain why reflecting on work activities is an important way to develop own knowledge and skills Define the term "personal development plan" Describe who should be involved in agreeing a personal development plan Describe the process for agreeing a personal development plan 	
Obser	vation of practice	
Pass Assessment Criteria		
OB7.1/OB7.2 Work as part of a team, seeking help and guidance when you are not sure		
Evidence portfolio and interview		
Pass Assessment Criteria		
EPI3.1 Take responsibility for, prioritise and reflect on your own actions and work		
EPI3.2. Work as part of a team, seeking help and guidance when you are not sure		
EPI3.3 Maintain and further develop your own skills and knowledge through development activities		
EPI3.3 Maintain evidence of your personal development and actively prepare for and participate in appraisal		
Amplification and Guidance		
Tasks and responsibilities: These could include supporting with social activities, monitoring health, assisting with eating, mobility and personal care		
Statutory standards:		
This could include:		



- Codes of practice
- Regulations
- Minimum standards
- National occupational standards
- Care Certificate

Others:

Could include your own colleagues and other professionals across health and social care in addition to individual users of services and their families.

Co-production:

The Care Act's statutory guidance states that co-production is:

'When an individual influences the support and services received, or when groups of people get together to influence the way that services are designed, commissioned and delivered'.

Use feedback from individuals and others:

This may include:

- individuals
- carers
- advocates
- supervisor, line manager or employer
- team members
- other professionals

A **personal development plan** may have a different name but will record information such as agreed objectives for development, proposed activities to meet objectives, timescales for review, etc.



Who should be involved: This may include:

- individuals
- carers
- advocates
- supervisor, line manager or employer
- team members
- other professionals



Health, safety and security		
Multipl	Multiple Choice Test	
The apprentice will know and understand	Indicative assessment criteria	
HS1.1 Legislation, policies and local ways of working which relate to health and safety at work HS1.2 Your responsibilities and the responsibilities of others, relating to health and safety at work	 List legislation relating to general health and safety in a healthcare setting Describe the main points of health and safety policies, procedures and local ways of working Compare the main health and safety responsibilities of healthcare workers, employers and individuals Identify tasks relating to health and safety that should only be carried out with special training Describe how to access additional support and information relating to health and safety 	
HS2.1 What to do in situations that could cause harm to themselves and others HS2.2 How to handle hazardous materials and substances HS2.3 What to do when there is an accident or sudden illness	 Define what is meant by "hazard" and "risk" Describe how to use a health and safety risk assessment Explain how and when to report potential health and safety risks that have been identified Describe how risk assessment can help address dilemmas between an individual's rights and health and safety concerns Identify hazardous materials and substances that may be found in the healthcare setting Describe safe practices for storing, using and disposing of hazardous materials and substances 	



- Describe different types of accidents and sudden illness that may occur in a healthcare setting
- Outline the procedures to be followed if an accident or sudden illness should occur
- Explain why it is important for emergency first aid tasks only to be carried out by qualified first aiders

Observation of practice

Pass Assessment Criteria

OB8.1 Maintain a safe and healthy working environment

Evidence portfolio and interview

Pass Assessment Criteria

EPI4.1 Maintain a safe and healthy working environment

EPI4.2 Take appropriate action in response to incidents or emergencies following local guidelines

Amplification and Guidance

Individuals are those requiring care and support, may include patients, service users or clients

Hazard is the potential for harm to occur

Risk is the likelihood for harm to occur

Healthcare settings may include:

- Hospitals
- Community clinics



- Health centres
- Individuals' homes
- Nursing/care homes
- Hospices
- Mental health settings
- GP surgeries



Duty of Care	
Multiple Choice Test	
The apprentice will know and understand	Indicative assessment criteria
DC1.1 The meaning of 'duty of care' and why it is important DC1.2 What support is available when you come across a difficult situation or when someone makes a complaint	 Define the term 'duty of care' Describe how duty of care relates to duty of candour Explain why duty of care is important and how it affects own role Describe difficult situations that may arise relating to duty of care Explain where to get additional support and advice about how to resolve difficult situations Describe the importance of an accessible complaints procedure for reducing the likelihood of abuse Explain the actions to take when receiving comments and complaints
Amplificati	on and Guidance
Duty of care means that a worker must aim to provide high-quality they may be unable to do so.	care to the best of their ability and say if there are any reasons why



Safeguarding	
Multi	ple Choice Test
The apprentice will know and understand	Indicative assessment criteria
S1.1 Legislation, policies and local ways of working about 'safeguarding' and protection from abuse S1.2 The signs of abuse and what to do if you suspect abuse S1.3 How to reduce the chances of abuse as much as possible	 Identify legislation, policies and local ways of working that relate to safeguarding and protection from abuse Explain the roles of different agencies in safeguarding and protecting individuals from abuse Identify reports into serious failures to protect individuals from abuse Identify sources of information and advice about own role in safeguarding and protecting individuals from abuse List types of abuse Identify the signs and/or symptoms associated with each type of abuse Describe factors that may contribute to an individual being more vulnerable to abuse Explain the actions to take if there are suspicions that an individual is being abused Explain the actions to take if an individual alleges that they are being abused Identify ways to ensure that evidence of abuse is preserved Explain how the likelihood of abuse may be reduced Explain the importance of an accessible complaints procedure for reducing the likelihood of abuse



Amplification and Guidance

Legislation, policies and local ways of working could include:

- General Data Protection Regulations
- Data Protection Act
- Health and Social Care Act
- Information Governance policy
- Health and Safety legislation
- Organisational policies and procedures
- Formally agreed guidance on how to carry out tasks in your workplace
- Less formally agreed ways of working
- Less formally documented by individual employers and the self-employed or formal policies

Types of abuse may include:

- physical abuse
- domestic violence or abuse
- sexual abuse
- psychological or emotional abuse
- financial or material abuse
- modern slavery
- discriminatory abuse
- organisational or institutional abuse
- neglect or acts of omission
- self-neglect

Abuse may be reduced by:

- working with person-centred values
- encouraging active participation



- promoting choice and rights
- supporting individuals with awareness of personal safety
- managing risk
- focusing on prevention



Infection prevention and control	
Multiple Choice Test	
The apprentice will know and understand	Indicative assessment criteria
IC1.1 Legislation, policies and local ways of working that help to prevent infection	Identify legislation, policies and local ways of working that help to prevent and control infection
IC1.2 The meaning of 'risk' and 'risk assessment'	Identify the roles and responsibilities in the prevention and control of infection
IC1.3 The importance of good personal hygiene and handwashing	 Define the term 'risk' Define the term 'risk assessment'
IC1.4 How to select the right personal protective equipment (such as gloves, aprons and masks)	 Describe the potential risks in a healthcare setting in relation to infection control Describe circumstances that are classified as high risk
IC1.5 How infections start and spread	Explain the importance of risk assessments in relation to infection control
IC1.6 The importance of cleaning, disinfecting and maintaining a clean workplace to reduce the risk and spread of infection	 Describe the process to follow when carrying out a risk assessment Describe ways of minimising risk in a healthcare setting Explain how the outcomes of risk assessments are communicated
IC1.7 The meaning of 'antimicrobial resistance'	to other employees • Define the term 'personal hygiene'
	 Describe the importance of maintaining high standards of personal hygiene
	Describe the importance of handwashing
	Outline workplace procedures relating to personal hygieneOutline workplace procedures for handwashing and drying



- Outline ways to ensure that own health and hygiene does not pose a risk to others
- Explain the risks associated with poor personal hygiene and poor handwashing techniques
- Explain why it is important to stay away from a healthcare setting when unwell
- Outline current legislation and regulation relating to personal protective equipment
- Describe different types of **personal protective equipment**
- Outline employers and employees' responsibilities in relation to personal protective equipment
- Explain how the level of risk determines the selection of the personal protective equipment used
- Describe procedures on how personal protective equipment should be used correctly
- Define the term 'infection'
- Identify common causes of infection
- Describe how infections can spread
- Describe procedures that are followed in healthcare settings to control infection
- Explain the importance of cleaning, disinfecting and maintaining cleanliness for reducing the risk and spread of infection
- Explain the consequences of inadequate cleaning, disinfecting and cleanliness in relation to the risk and spread of infection
- Define the term 'antimicrobial resistance'
- Describe ways to reduce antimicrobial resistance



Observation of practice

Pass Assessment Criteria

OB9.1/OB9.2 Use a range of techniques for infection prevention and control including waste management, handwashing and the use of Personal Protective Equipment (PPE)

Evidence portfolio and interview

Pass Assessment Criteria

EPI4.3 Use a range of techniques for infection prevention and control including waste management, handwashing and the use of Personal Protective Equipment (PPE)

Amplification and Guidance

Roles and responsibilities could include those of:

- self
- employer
- individuals
- others

Risk is the likelihood for harm to occur

A **risk assessment** identifies potential causes of harm, assesses how likely that harm is to occur and what can be done to reduce the risk of harm

Healthcare settings may include:

- Hospitals
- Community clinics
- Health centres
- Individuals' homes
- Nursing/care homes



- Hospices
- Mental health settings
- GP surgeries

Personal hygiene involves those practices performed by an individual to care for one's bodily health and wellbeing, through cleanliness

Personal protective equipment may include:

- gloves
- aprons
- masks

Infection refers to when microorganisms e.g. bacteria and viruses which are not normally present within the body invade and grow causing illness and/disease

Antimicrobial resistance refers to the ability of microbes to grow in the presence of a chemical (drug) that would normally kill them or limit their growth



Moving and handling Multiple Choice Test	
MH1.1 Why people and objects need to be moved safely	List the states of functional mobility a person who needs to be moved might have
MH1.2 How to move and position people safely	Describe safe movement principles associated with moving people
MH1.3 How to move and handle equipment and other objects safely	 Outline the types of handling or lifting equipment designed to be used for moving people and objects
MH1.4 Agreed ways of working when moving people and know how to identify any risks	 Outline the potential impact to a person who is moved incorrectly Outline the ways to ensure the dignity, health and safety of the person being Outline the process for carrying out a manual handling risk
	 Outline the process for carrying out a mandar handing risk assessment Describe safe movement principles associated with manual
	handling
	 Outline the potential injuries and ill health associated with incorrect manual handling
	 Outline employers' and employees' duties relating to manual handling at work
	Outline the consequences for non-compliance with health and safety requirements at work
	 Outline the purpose of types of moved equipment designed to be used for manual handling of objects



•	Describe the requirements for the testing, servicing and
	examination of manual handling and lifting equipment for objects

- Outline the process of risk assessment in relation to moving a person
- Outline the control measures that might be used to reduce the risks associated with moving people
- State the content of a personal handling plan
- Describe the requirements for the testing, servicing and examination of people handling or lifting equipment

Observation of practice

Pass Assessment Criteria

OB10.1/OB10.2 Move and position individuals, equipment and other items safely

Evidence portfolio and interview

Pass Assessment Criteria

EPI4.4 Move and position individuals, equipment and other items safely

Amplification and Guidance

States of functional mobility may include total mobility, partial mobility, immobility, temporary and permanent

Potential injuries and ill health may include musculoskeletal disorders (MSDs), fatigue, cuts, bruises, fractures



Equality and diversity	
Multiple Choice Test	
The apprentice will know and understand	Indicative assessment criteria
ED1.1 Equality and diversity legislation, policies and local ways of working ED1.2 Why equality is important and how discrimination can happen at work	 Identify legislation, policies and local ways of working relating to equality, diversity and discrimination Describe how legislation, policies and local ways of working apply to own role Identify a range of sources of information, advice and support about equality, diversity and inclusion Describe how and when to access information, advice and support about equality, diversity and inclusion Explain the importance of equality in healthcare settings Describe ways in which discrimination may deliberately or inadvertently occur in healthcare settings Explain how practices that support equality and inclusion reduce the likelihood of discrimination

Amplification and Guidance

Legislation, policies and local ways of working could include:

- equality legislation
- organisational policies and procedures
- formally agreed guidance on how to carry out tasks in your workplace
- less formally agreed ways of working
- less formally documented by individual employers and the self-employed or formal policies



Healthcare settings may include:

- Hospitals
- Community clinics
- Health centres
- Individuals' homes
- Nursing/care homes
- Hospices
- Mental health settings
- GP surgeries



Care
Value - Portfolio of Evidence
Pass assessment criteria
EPI5.1: Be caring and compassionate

Honesty
Value - Portfolio of Evidence
Pass assessment criteria
EPI5.2: Be honest

Commitment
Value - Portfolio of Evidence
Pass assessment criteria
EPI5.3: Be conscientious and committed



Dignity

Behaviour - Observation and Portfolio of evidence and interview

Pass assessment criteria

OB4.1/OB4.2 Treat people with dignity, respecting individual's diversity, beliefs, culture, values, needs, privacy and preferences

EPI6.1 Treat people with dignity, respecting individual's diversity, beliefs, culture, values, needs, privacy and preferences

Respect

Behaviour – Observation and Portfolio of evidence and interview

Pass assessment criteria

OB5.1 Show respect and empathy for those you work with

EPI6.2 Show respect and empathy for those you work with

Courage

Behaviour – Observation and Portfolio of evidence and interview

Pass assessment criteria

OB5.2 Have the courage to challenge areas of concern and work to best practice

EPI6.3 Have the courage to challenge areas of concern and work to best practice



Adaptability
Behaviour – Observation and Portfolio of evidence and interview
Pass assessment criteria
OB5.3 Be adaptable, reliable and consistent
EPI6.4 Be adaptable, reliable and consistent

Discretion
Behaviour – Observation and Portfolio of evidence and interview
Pass assessment criteria
OB6.1 Show discretion towards others
EPI6.5 Show discretion towards others

Resilience and self-awareness	
Behaviour - Observation and Portfolio of evidence and interview	
Pass assessment criteria	
OB6.1 Show self-awareness	
EPI6.6 Show self-awareness	



Behaviour - Portfolio of evidence and interview	
Pass assessment criteria	
EPI6.7: Show resilience	

Evidence Portfolio and interview		
Additional Pass Criteria		
Pass assessment criteria Exemplification		
P1 The portfolio comprises a range of valid sources of evidence	Evidence <u>must</u> include: Minimum of 1 direct observation evidence in the workplace as a primary source of evidence (normally in the last three months of the apprenticeship). Minimum of 2 reflective accounts (see P2 below)	
P2 The portfolio contains 2 short reflective accounts that show satisfactory evidence and ability to relate concepts and theories to practice and/or when answering questions during the interview.	At least 2 reflective accounts required. The reflective accounts are adequate, with some evidence of basic knowledge relating concepts and theories to practice. Reflective accounts/during interview demonstrate what the apprentice has achieved while on programme covering: • Communication • health interventions	



Evidence Portfolio and interview	
Additional Pass Criteria	
Pass assessment criteria	Exemplification
	 Dementia, cognitive issues, mental health Basic life support Physiological measurements person and people development
	 health, safety and security Infection prevention and control Moving and handling
	 Being caring and compassionate Being honest to individuals and others Being conscientious and committed Show resilience



Evidence Portfolio and interview	
Additional Merit Criteria	
Merit assessment criteria	Exemplification
M1 Provide evidence of enhanced understanding through wider reading	Examples demonstrate how underpinning knowledge and principles are applied to practice, with a varied range of examples. The reflective accounts/responses in interview relate to a range of policies, procedures and good practice that are applied to their practice that are as a result of wider reading. Wider reading will provide more detailed support than the pass.



Evidence Portfolio and interview		
Additional Distinction Criteria		
Distinction assessment criteria	Exemplification	
D1 The portfolio comprises a creative range of valid sources of evidence	Minimum of 1 direct observation evidence in the workplace as a primary source of evidence (normally in the last three months of the apprenticeship). Minimum of 2 reflective accounts (see P2 above) Minimum of 2 other types/sources of evidence such as: feedback from line manager, direct reports and peer observations, personal development planning, project plans/other work plans, data analysis activities, case studies, team meeting minutes, evidence of study days and training courses attended, evidence of mentoring or buddy support, testimonies from individuals who use services and/or their carers, etc.	



Evidence Portfolio and interview		
Additional Distinction Criteria		
Distinction assessment criteria	Exemplification	
D2 The portfolio contains reflective accounts showing evidence of relating concepts and theories to practice and ability to make connections between learning and future practice and/or when answering questions during the interview.	Reflective accounts demonstrate what the apprentice has achieved while on programme. Reflective accounts/responses show evidence of understanding of how concepts and theories connect to learning and future practice.	
D3 Is able to engage in wider discussion demonstrating understanding of concepts and theories achieved through extensive reading	The responses demonstrate understanding of concepts and theories, and the apprentice leads engagement in wider discussion. Evidence has clear rationalisation of action taken and outcomes achieved. Evidence reflects how a range of policies, procedures and good practice has a direct effect on practice, demonstrating extensive reading.	

Click here to return to contents



Assessment Summary

The end-point assessment for Healthcare Support Worker Apprenticeship Standard is made up of three components:

- 1. Multiple-choice test consisting of 60 questions, which has a 60-minute duration
- 2. Practical observation undertaken in the workplace, which has a 120-minute duration
- 3. Evidence portfolio completed with an interview, which has a maximum 60-minute duration

As an employer/training provider, you should agree a plan and schedule with the apprentice to ensure all assessment components can be completed effectively. Each component of the end-point assessment will be assessed against the appropriate criteria laid out in this kit and a mark allocated. The grade will be determined using the combined mark.

Multiple Choice Test

Apprentices will complete a multiple-choice test. The 60-question multiple-choice test covers all knowledge requirements within the standard. The criteria for the multiple-choice test are the knowledge-based criteria described earlier in this guide.

- To achieve a pass, apprentices must achieve a minimum of 30 out of 60
- To achieve a merit, apprentices must achieve a minimum of 40 out of 60
- To achieve a distinction, apprentices must achieve a minimum of 50 out of 60

Practical Observation

The observation of practice is a 120-minute holistic approach to assessing skills and behaviours. The end-point assessor observes the apprentice during the course of their normal work in their normal place of work.

The criteria that will be covered within the practical observation are selected from the behaviours and skills of the standard, shown earlier in this guide. To pass the observation of practice the apprentice must be able to meet the requirements in bold. Requirements not emboldened which do not occur naturally during the observation period may be tested during the interview.



The apprentice will fail if they do not meet all of the requirements for each outcome linked to the pass criteria and/or the end-point assessor has to stop the observation because they have observed unsafe practice.

The practical observation is graded as Pass or Fail.

Evidence Portfolio and Interview

The apprentice will produce an evidence portfolio and undertake an interview. The endpoint assessor will assess the portfolio and judge whether additional questions will be required to achieve the skills, values and behaviours during the interview. The assessor will pose holistic and synoptic lead and/or secondary questions to the apprentice that enable them to provide answers that cover the remaining elements of the standard, to ensure all skills, values and behaviours have been attempted. These questions may also facilitate the achievement of carry-over from the observation.

The final interview takes place between the independent assessor and the apprentice and lasts for a maximum of 60 minutes.

The evidence portfolio and interview is graded holistically as Pass, Merit or Distinction by the independent assessor. There are specific pass, merit and distinction criteria outlined later in this kit.

In order to pass,, the apprentice must meet all of the skills, values and behaviour criteria and meet the additional pass criteria found in the following pages.

In order to achieve a merit, the apprentice must meet all of the skills, values and behaviour criteria and meet the additional pass and merit criteria found in the following pages.

In order to achieve a distinction, the apprentice must meet all of the skills, values and behaviour criteria and meet the additional pass, merit and distinction criteria found in the following pages.

The apprentice will fail if they do not meet all of the pass criteria.



Grading

For final certification, the apprentice must have passed all components in the endpoint assessment. The successful apprentice receives an overall grade of Pass, Merit or Distinction. The grade is derived from the components of the end-point assessment using the following table.

Observation of practice	Multiple-choice Test	Evidence Portfolio and Interview	Overall Grade
Pass	Pass	Pass	Pass
Pass	Pass	Merit	Pass
Pass	Pass	Distinction	Merit
Pass	Merit	Pass	Pass
Pass	Merit	Merit	Merit
Pass	Merit	Distinction	Merit
Pass	Distinction	Pass	Merit
Pass	Distinction	Merit	Merit
Pass	Distinction	Distinction	Distinction

The final judgement on the competency of the apprentice, the grade to be awarded for each component and the overall grade rests with the end-point assessor.

Retake and Re-sit information

The apprentice must attempt all components of the end-point assessment on their first attempt. Should the apprentice fail any components they are required to re-take only those components which they have previously failed. Resits are not available on this standard. Re-takes are permitted after 1 month and within 12 months but not after 12 months.

The apprentice will require a period of further learning and will need to complete a new gateway readiness meeting and report. Once this is completed, please call the Highfield scheduling team to arrange the retake.

When undertaking a retake, the assessment method(s) will need to be re-attempted in full, regardless of any individual assessment criteria that were passed on any prior attempt. The EPA Report will contain feedback on areas for development and retake guidance.

Apprentices who achieve a pass grade cannot resit or retake the EPA to achieve a higher grade.

Click here to return to contents



Assessing the Multiple-Choice Test

Apprentices will complete a multiple-choice test. The 60- question multiple-choice test covers all knowledge requirements within the standard.

- To achieve a pass, apprentices must achieve a minimum of 30 out of 60
- To achieve a merit, apprentices must achieve a minimum of 40 out of 60
- To achieve a distinction, apprentices must achieve a minimum of 50 out of 60

The topics covered within the test are listed below:

- Communication
- Health Intervention
- Person-centred care and support
- Dementia, cognitive issues, mental health
- Basic life support
- Physiological measurements
- Personal and people development
- Health, safety and security
- Duty of care
- Safeguarding
- Infection prevention and control
- Moving and handling
- Equality and diversity

In each paper, questions will cover each of the areas above, however not every aspect of every area will be covered in every test.

Before the assessment

The employer/training provider should:

- brief the apprentice on the areas that will be assessed by the multiple-choice test
- in readiness for end-point assessment, set the apprentice a mock multiple choice test. A test is available to download from the Highfield Assessment website. The mock tests are available as paper-based tests and also on the mock e-assessment system.



Multiple Choice Test Criteria

	Communication
	Communication
C1.1 Why it is important to	Identify reasons why people communicate at work
communicate effectively at	Explain how effective communication affects aspects of
work	work in healthcare settings
	 Explain the benefits of observing an individual's
C1.2 How to communicate	reactions when communicating with them
with individuals that have	• Explain why it is important to find out an individual's
specific language needs or	specific language needs or wishes
wishes	Describe methods to use when communicating with
	individuals who have specific language needs or wishes
C1.3 Ways to make yourself	Identify communication problems
understood	Describe ways to reduce communication problems and
	make yourself understood
C1.4 How to reduce problems	Describe ways to check that communication has been
with communication	understood
	• Identify sources of information and support or services
	to enable more effective communication
C2.1 Legislation, policies and	Identify legislation relating to the handling of
local ways of working about	information
handling information	• Explain policies relating to the handling of information
	• Explain the impact of local ways of working on the
C2.2 How to keep information	handling of information
confidential	Define the term 'confidentiality'
	Describe ways of handling confidential information
C2.3 Why it is important to	securely
record and store patient	Describe situations where information normally
information securely and what	considered to be confidential might need to be shared
to do if you think information	with agreed others
is not secure	Identify types of patient information that are stored
	securely
	• Explain why the security of patient information is
	important
	Explain how and when to seek advice about the
	security of information
	security of information



	Health Intervention
HI1.1 How to do routine clinical tasks delegated from a registered nurse or other healthcare professional	 Describe how to do a range of routine clinical tasks Explain the importance of staying within limits of own competence and authority when performing routine clinical tasks
HI2.1 The signs and symptoms of a person who is experiencing pain or discomfort	 Describe causes of different types of pain or discomfort List the signs and symptoms of different types of pain or discomfort
HI3.1 How to promote a person's physical health and wellbeing	 Explain how individual identity and self-esteem are linked with health, comfort and wellbeing Describe attitudes and approaches that are likely to promote an individual's health and wellbeing
HI4.1 How to support a person's comfort and wellbeing	 Describe methods of supporting a person's comfort and wellbeing Identify ways to contribute to an environment that promotes health, comfort and wellbeing
HI5.1 The importance of hydration, nutrition and food safety	 Explain the importance of hydration and nutrition in maintaining health and wellbeing Explain the importance of food safety procedures, risk assessment, safe handling and behaviour Explain how to promote hydration, nutrition and food safety in a healthcare setting
HI6.1 What the activities of daily living are and which ones you are expected to support in your role	 Describe a range of activities of daily living relevant to healthcare Describe how own role fits within supporting activities of daily living Explain the importance of staying within limits of own competence and authority when supporting activities of daily living
HI7.1 The signs of a person whose health and wellbeing is deteriorating; HI7.2 How to report changes and deterioration	 Describe signs that may indicate a person's health or well-being are deteriorating Explain the importance of recognising that deterioration in health or wellbeing may occur without clear signs Explain the process for reporting deterioration in health or wellbeing



Person-centred care and support

PC1.1 What it means to give 'person centred care and support'

PC1.2 Why it is important to get consent, even when it is difficult

PC1.3 Why it is important to get people actively involved in their own care

PC1.4 Why it is important to give people choices about their care

PC1.5 Why treating people as valuable and unique individuals makes a big difference in how they feel

- Define 'person-centred care and support'
- List person-centred values
- Explain the relationship between person centred care and support and own responsibilities as a healthcare support worker
- Define the term 'consent'
- Explain the importance of gaining consent
- Describe how to establish consent for an activity or action
- Explain what steps to take if consent cannot be readily established
- Define what is meant by 'active participation'
- Describe how active participation benefits an individual
- Explain ways of encouraging active participation
- Describe ways of reducing barriers to active participation
- Identify ways of supporting an individual to make informed choices
- Explain why risk-taking can be part of an individual's right to make choices
- Explain how agreed risk assessment processes are used to support the right to make choices
- Explain why a worker's personal views should not influence an individual's choices
- Describe how to support an individual to question or challenge decisions concerning them that are made by others
- Describe how to treat people as valuable and unique individuals
- Explain the benefits to **wellbeing** of treating people as valuable unique individuals



Dementia, cognitive issues and mental health		
DM1.1 The main forms of	Identify the main forms of mental ill health	
mental ill health and their	Describe the symptoms associated with the main	
impact on people's lives	forms of mental ill health	
	Explain how mental ill health impacts uniquely on	
DM1.2 How to promote	people's lives	
mental health and wellbeing	Explain the importance of mental health and wellbeing	
	Describe ways to promote positive mental health and	
	wellbeing in healthcare settings	
DM2.1 The possible signs of	Define the term 'mental capacity'	
limitations in mental capacity	List possible signs of limitations in mental capacity	
and what to do when you	Explain actions to take when possible signs of	
notice them	limitations in mental capacity are noticed	
	Explain the importance of staying within limits of own	
	competence and authority when identifying and acting	
	upon signs of limitations in mental capacity	
DM3.1 The possible signs of	Describe possible signs of mental health, dementia and	
mental health, dementia and	learning disabilities in people	
learning disability in people	 Explain the process of reporting possible signs of 	
	mental health, dementia or learning disabilities within	
DM3.2 Why depression,	agreed ways of working	
delirium and the normal	Compare the symptoms of depression, delirium and	
ageing process may be	the normal ageing process with the symptoms of	
mistaken for dementia	dementia	
	Explain why depression, delirium and the normal	
DM3.3 The importance of early	ageing process may be mistaken for dementia	
diagnosis in relation to	Explain the importance of staying within limits of own	
dementia and other cognitive .	competence and authority when identifying symptoms	
issues	of dementia	
	Describe ways in which dementia and other cognitive	
	issues are diagnosed	
	Explain the consequences of failing to diagnose	
	dementia and other cognitive issues at an early stage	



Dementia, cognitive issues and mental health		
DM4.1 How to report changes or deterioration	 Describe changes or deterioration which can occur to someone's mental health, dementia or cognitive issues Explain how to report changes or deterioration Explain the importance of reporting changes or deterioration 	

		Basic life support
BL1.1 How to perform basic	•	Define the term 'basic life support'
life support	•	Describe situations in which it would be necessary to
		perform basic life support in healthcare settings
	•	Describe resuscitation techniques and equipment used
		to perform basic life support
	•	Explain the importance of staying within limits of own
		competence and authority when performing basic life
		support

Physiological measurements		
PM1.1 The range of physiological states that can be measured including body temperature, weight, height, blood pressure, pulse and breathing rate	 Define 'physiological state' Identify the types of measurement which can be used to determine physiological state Explain how to take measurements 	
PM2.1 The normal range of physiological measurements	 Explain the normal range of physiological measurements Explain the importance of the normal range of physiological measurements 	

Personal and people development		
PP1.1 Your role and the	Describe tasks and responsibilities of own role	
responsibilities and duties of	Outline how own role fits within the structure and	
your job	context of the organisation	
	Outline limits of responsibility based on own training	
PP1.2 Why it is important to	and expertise	
work in ways that have been	Identify statutory standards that influence own role	



Personal and people development		
agreed by your employer and to follow standards/codes of conduct	Describe how statutory standards and codes of practice influence own role	
PP2.1 Working relationships and the importance of working well with other people PP2.2 Who or where to go for help and support about anything related to your work	 Describe the importance of professional boundaries in healthcare Explain how a professional relationship is different from a personal relationship Compare the differences between professional relationships with individuals and others Define the term co-production Explain the importance of working in partnership with individuals and others Give examples of how to work in partnership with individuals and others in the interests of the individual being supported Identify areas of your work when help and support may be needed Identify sources of help and support for areas of your own work 	
PP3.1 The importance of personal development and how to reflect on your work PP3.2 How to create a personal development plan	 Explain how to use feedback from individuals and others to support own learning and development Explain why reflecting on work activities is an important way to develop own knowledge and skills Define the term "personal development plan" Describe who should be involved in agreeing a personal development plan Describe the process for agreeing a personal development plan 	

Health, safety and security		
HS1.1 Legislation, policies and	• List legislation relating to general health and safety in a	
local ways of working which	healthcare setting	
relate to health and safety at	• Describe the main points of health and safety policies,	
work	procedures and local ways of working	
	Compare the main health and safety responsibilities of	
HS1.2 Your responsibilities and	healthcare workers, employers and individuals	
the responsibilities of others,	Identify tasks relating to health and safety that should	
	only be carried out with special training	



Health, safety and security		
relating to health and safety at	Describe how to access additional support and	
work	information relating to health and safety	
HS2.1 What to do in situations	Define what is meant by "hazard" and "risk"	
that could cause harm to	Describe how to use a health and safety risk	
themselves and others	assessment	
HS2.2 How to handle	Explain how and when to report potential health and safety risks that have been identified	
hazardous materials and	Describe how risk assessment can help address	
substances	dilemmas between an individual's rights and health	
	and safety concerns	
HS2.3 What to do when there	Identify hazardous materials and substances that may	
is an accident or sudden illness	be found in the healthcare setting	
	Describe safe practices for storing, using and disposing	
	of hazardous materials and substances	
	Describe different types of accidents and sudden illness	
	that may occur in a healthcare setting	
	Outline the procedures to be followed if an accident or	
	sudden illness should occur	
	Explain why it is important for emergency first aid tasks	
	only to be carried out by qualified first aiders	

Duty of Care		
DC1.1 The meaning of 'duty of	Define the term 'duty of care'	
care' and why it is important	Describe how duty of care relates to duty of candour	
	Explain why duty of care is important and how it affects	
DC1.2 What support is	own role	
available when you come	Describe difficult situations that may arise relating to	
across a difficult situation or	duty of care	
when someone makes a	Explain where to get additional support and advice	
complaint	about how to resolve difficult situations	
	Describe the importance of an accessible complaints	
	procedure for reducing the likelihood of abuse	
	Explain the actions to take when receiving comments	
	and complaints	



Safeguarding

- S1.1 Legislation, policies and local ways of working about 'safeguarding' and protection from abuse
- S1.2 The signs of abuse and what to do if you suspect abuse
- S1.3 How to reduce the chances of abuse as much as possible

- Identify **legislation**, **policies and local ways of working** that relate to safeguarding and protection from abuse
- Explain the roles of different agencies in safeguarding and protecting individuals from abuse
- Identify reports into serious failures to protect individuals from abuse
- Identify sources of information and advice about own role in safeguarding and protecting individuals from abuse
- List types of abuse
- Identify the signs and/or symptoms associated with each type of abuse
- Describe factors that may contribute to an individual being more vulnerable to abuse
- Explain the actions to take if there are suspicions that an individual is being abused
- Explain the actions to take if an individual alleges that they are being abused
- Identify ways to ensure that evidence of abuse is preserved
- Explain how the likelihood of abuse may be reduced
- Explain the importance of an accessible complaints procedure for reducing the likelihood of abuse

Infection prevention and control

- IC1.1 Legislation, policies and local ways of working that help to prevent infection
- IC1.2 The meaning of 'risk' and 'risk assessment'
- IC1.3 The importance of good personal hygiene and handwashing
- IC1.4 How to select the right personal protective equipment

- Identify **legislation**, **policies and local ways of working** that help to prevent and control infection
- Identify the roles and responsibilities in the prevention and control of infection
- Define the term 'risk'
- Define the term 'risk assessment'
- Describe the potential risks in a healthcare setting in relation to infection control
- Describe circumstances that are classified as high risk
- Explain the importance of risk assessments in relation to infection control
- Describe the process to follow when carrying out a risk assessment



Infection prevention and control

(such as gloves, aprons and masks)

IC1.5 How infections start and spread

IC1.6 The importance of cleaning, disinfecting and maintaining a clean workplace to reduce the risk and spread of infection

IC1.7 The meaning of 'antimicrobial resistance'

- Describe ways of minimising risk in a healthcare setting
- Explain how the outcomes of risk assessments are communicated to other employees
- Define the term 'personal hygiene'
- Describe the importance of maintaining high standards of personal hygiene
- Describe the importance of handwashing
- Outline workplace procedures relating to personal hygiene
- Outline workplace procedures for handwashing and drying
- Outline ways to ensure that own health and hygiene does not pose a risk to others
- Explain the risks associated with poor personal hygiene and poor handwashing techniques
- Explain why it is important to stay away from a healthcare setting when unwell
- Outline current legislation and regulation relating to personal protective equipment
- Describe different types of personal protective equipment
- Outline employers and employees' responsibilities in relation to personal protective equipment
- Explain how the level of risk determines the selection of the **personal protective equipment** used
- Describe procedures on how personal protective equipment should be used correctly
- Define the term 'infection'
- Identify common causes of infection
- Describe how infections can spread
- Describe procedures that are followed in healthcare settings to control infection
- Explain the importance of cleaning, disinfecting and maintaining cleanliness for reducing the risk and spread of infection
- Explain the consequences of inadequate cleaning, disinfecting and cleanliness in relation to the risk and spread of infection



- Define the term 'antimicrobial resistance'
- Describe ways to reduce antimicrobial resistance

Moving and handling

MH1.1 Why people and objects need to be moved safely

MH1.2 How to move and position people safely

MH1.3 How to move and

handle equipment and other objects safely MH1.4 Agreed ways of working when moving people and know how to identify any risks

- List the **states of functional mobility** a person who needs to be moved might have
- Describe safe movement principles associated with moving people
- Outline the types of handling or lifting equipment designed to be used for moving people and objects
- Outline the potential impact to a person who is moved incorrectly
- Outline the ways to ensure the dignity, health and safety of the person being moved
- Outline the process for carrying out a manual handling risk assessment
- Describe safe movement principles associated with manual handling
- Outline the potential injuries and ill health associated with incorrect manual handling
- Outline employers' and employees' duties relating to manual handling at work
- Outline the consequences for non-compliance with health and safety requirements at work
- Outline the purpose of types of equipment designed to be used for manual handling of objects
- Describe the requirements for the testing, servicing and examination of manual handling and lifting equipment for objects
- Outline the process of risk assessment in relation to moving a person
- Outline the control measures that might be used to reduce the risks associated with moving people
- State the content of a personal handling plan
- Describe the requirements for the testing, servicing and examination of people handling or lifting equipment



ED1.1 Equality and diversity legislation, policies and local ways of working

ED1.2 Why equality is important and how discrimination can happen at work

- Identify **legislation**, **policies and local ways of working** relating to equality, diversity and discrimination
- Describe how legislation, policies and local ways of working apply to own role
- Identify a range of sources of information, advice and support about equality, diversity and inclusion
- Describe how and when to access information, advice and support about equality, diversity and inclusion
- Explain the importance of equality in healthcare settings
- Describe ways in which discrimination may deliberately or inadvertently occur in healthcare settings
- Explain how practices that support equality and inclusion reduce the likelihood of discrimination

Click here to return to contents



Assessing the Practical Observation

The practical observation should be a maximum of 120 minutes. It will be pre-planned and scheduled at a time when the apprentice will be undertaking their normal work in their normal place of work. To ensure coverage of the appropriate skills and behaviours areas of the standard, observations may be split or conducted on two separate occasions and this will need to be clearly organised during planning and evidenced within the documentation. The end-point assessor will carry out the practical observation which should enable the apprentice to evidence the skills and behaviours outlined below.

To pass the practical observation the apprentice must be able to meet the following requirements. Those highlighted in bold **must** be seen during the observation. Requirements not emboldened which do not occur naturally during the observation period may be tested during the interview.

- OB1.1 Communicate effectively with individuals, keeping information confidential
- OB1.2 (Communication with) their families, carers and healthcare practitioners using a range of techniques
- OB2.1 Handle information in line with local and national policies
- OB2.2 Record, report and store information related to individuals
- **OB3.1 Demonstrate person-centred care and support**
- **OB4.1 Treat people with dignity**
- OB4.2 Respecting individual's diversity, beliefs, culture, values, needs, privacy and preferences
- OB5.1 Show respect and empathy for those you work with
- OB5.2 Have the courage to challenge areas of concern and work to best practice;
- OB5.3 be adaptable, reliable and consistent
- OB6.1 Show discretion and self-awareness
- OB7.1 Work as part of a team
- OB7.2 Seeking help and guidance when they are not sure
- **OB8.1** Maintain a safe and healthy working environment
- OB9.1 Use a range of techniques for infection prevention and control
- OB9.2 (infection prevention and control) Including waste management, handwashing and the use of personal protective equipment (PPE)
- **OB10.1** Move and position individuals safely
- OB10.2 (move and position) equipment and other items



During the interview, the end-point assessor will ask questions that allow the apprentice to demonstrate knowledge and their experience in the areas that are not seen in the observation (unemboldened criteria only).

Simulation

During the practical observation, where possible, situations and evidence must be naturally occurring, however, in order to ensure that all emboldened criteria can be covered, simulation will be allowed to ensure full coverage of **observation skill 10**: Move and position individuals and equipment safely, if necessary.

This should be arranged before the assessment takes place to give the best opportunity for this skill to be met if the employer/on-programme assessor feels that it is not likely to occur naturally during the live observation. A suitable work environment and consenting individual(s) should be used to enable the apprentice to demonstrate the relevant skills. Those involved should not have a vested interest in the outcome of the assessment and do not have to be individuals being cared for.

Should the employer/on-programme assessor identify further emboldened observation skills and/or behaviours that are unlikely to be demonstrated naturally, Highfield Assessment should be notified of these prior to end-point assessment.

Grading

The practical observation is graded as pass or fail.

The apprentice will be assessed against all of the observation skills, values and behaviour requirements identified in the tables on the following pages.

To achieve a pass, the apprentice must achieve all of the pass criteria.

The apprentice will fail if they do not meet all of the requirements for each outcome linked to the pass criteria above and/or the end-point assessor has to stop the observation because they have observed unsafe practice.

Before the assessment:

Employers/training providers should:

- ensure the apprentice knows the date, time and location of the assessment
- ensure the apprentice knows which criteria will be assessed (outlined on the following pages)
- encourage the apprentice to reflect on their experience and learning onprogramme to understand what is required to meet the standard



 be prepared to provide clarification to the apprentice, and signpost them to relevant parts of their on-programme experience as preparation for this assessment

It is suggested that a mock observation is carried out by the apprentice in advance of the EPA with the training provider/employer giving feedback on any areas for improvement.



Practical Observation Mock Assessment

It is the employer/training provider's responsibility to prepare apprentices for their end-point assessment, and Highfield recommends that the apprentice experiences a mock practical observation in advance of the end-point assessment with the training provider/employer giving feedback on any areas for improvement.

In designing a mock assessment, the employer/training provider should include the following elements in its planning:

- the mock observation should take place in a real workplace or a realistic simulation if the real workplace does not present all the required assessment opportunities:
 - it is strongly recommended that the mock observation has been practised beforehand and all personnel involved are properly briefed on their roles
- a 120-minute time slot should be available for the observation if it is intended to be a complete mock assessment covering all relevant standards. However, this time may be split up to allow for progressive learning.
- consider a video recording of the mock and allow the mock to be observed by other apprentices, especially if it is not practicable for the employer/training provider to carry out a separate mock assessment with each apprentice.
- ensure that the apprentice's performance is assessed by a competent trainer/assessor, and that feedback is shared with the apprentice to complete the learning experience.
- mock assessment sheets are available to download from the Highfield Assessment website and may be used for this purpose



Practical Observation Criteria

Throughout the practical observation, the end-point assessor will assess the apprentice's competence in the criteria outlined below. Apprentices should prepare for the practical observation by considering how the criteria can be met during the observation.

Pass Assessment Criteria
OB1.1 Communicate effectively with individuals, keeping information
confidential
OB1.2 (Communication with) their families, carers and healthcare practitioners
using a range of techniques
OB2.1 Handle information in line with local and national policies
OB2.2 Record, report and store information related to individuals
OB3.1 Demonstrate person-centred care and support
OB4.1 Treat people with dignity
OB4.2 Respecting individual's diversity, beliefs, culture, values, needs, privacy
and preferences
OB5.1 Show respect and empathy for those you work with
OB5.2 Have the courage to challenge areas of concern and work to best practice
OB5.3 be adaptable, reliable and consistent
OB6.1 Show discretion and self-awareness
OB7.1 Work as part of a team
OB7.2 Seeking help and guidance when they are not sure
OB8.1 Maintain a safe and healthy working environment
OB9.1 Use a range of techniques for infection prevention and control
OB9.2 (infection prevention and control) Including waste management,
handwashing and the use of personal protective equipment (PPE)
OB10.1 Move and position individuals safely
OB10.2 (move and position) equipment and other items safely

Click here to return to contents



Assessing the Evidence Portfolio and Interview

The evidence portfolio and interview form a combined assessment method and will be assessed holistically, with a grade awarded as Fail, Pass, Merit or Distinction by the end-point assessor. End-point assessors will assess all evidence provided by the apprentice for this combined assessment method and make a final holistic judgement on the ability of the apprentice.

The reflective accounts **must** be written in the final 3 months of the apprenticeship prior to gateway. Other supporting evidence submitted, including the direct observation, can be utilised from any point of the on-programme learning. Both form the portfolio and this must be collated in the final 3 months of the apprenticeship prior to gateway. The highest quality of evidence is most likely to be generated towards the end of the on-programme period.

The portfolio must contain a least 1 direct observation in the workplace as the primary source of evidence and at least 2 reflective accounts completed by the apprentice which demonstrate their learning and application of knowledge and skills in practice, their values and behaviours and their ability to relate concepts and theories to practice and future practice. The apprentice may include other types/sources of evidence in their portfolio also (minimum of 2 to achieve a distinction).

The apprentice is required to evidence the skills, values and behaviour requirements of the following areas from the apprenticeship standard in the portfolio:

- Communication
- Health interventions
- Dementia, cognitive issues, mental health
- Basic life support
- Physiological measurements
- Personal and people development
- Health, safety and security
- Infection, prevention and control
- Moving and handling
- Being caring and compassionate
- Being honest to individuals and others
- Being conscientious and committed
- Show resilience

Further pass and grading requirements can be found within the section 'evidence portfolio and interview criteria' below.



The interview

The final interview takes place between the independent assessor and the apprentice and lasts for a maximum of 60 minutes.

The interview will assess skills behaviours and values that have not been fully achieved by the portfolio. The end-point assessor will make a final assessment decision based on all evidence provided for the reflective journal and the interview. Carry-over from the Practical Observation (if required) will be covered during the interview. These carry over criteria areas will only count towards the practical observation assessment.

The apprentice should use the grading guidance provided at the end of this section to support their preparation for end-point assessment.

Grading guidance for the reflective journal and interview component

The evidence portfolio and interview is graded holistically as Fail, Pass, Merit or Distinction by the end-point assessor. End-point assessors will review all evidence provided by the apprentice for this combined assessment method and make a final holistic judgement on the ability of the apprentice.

If the apprentice does not provide sufficient evidence to demonstrate that their performance meets the requirements of the pass grading criteria, then the result will be a fail.

- In order to pass, the apprentice must meet all of the skills, values and behaviour criteria and meet the additional grading criteria found in the following pages.
- In order to achieve a merit, the apprentice must meet all of the skills, values and behaviour criteria and meet the additional grading criteria found in the following pages.
- In order to achieve a distinction, the apprentice must meet all of the skills, values and behaviour criteria and meet the additional grading criteria found in the following pages.

Before the assessment:

Employers/training providers should:

• plan the evidence portfolio and interview to allow the apprentice the opportunity to demonstrate each of the required standards



- ensure the apprentice knows the date, time and location of the assessment
- ensure the apprentice knows which criteria will be assessed (outlined on the following pages)
- encourage the apprentice to reflect on their experience and learning onprogramme to understand what is required to meet the standard
- be prepared to provide clarification to the apprentice, and signpost them to relevant parts of their on-programme experience as preparation for this assessment

Evidence Portfolio and Interview Mock Assessment

It is the employer/training provider's responsibility to prepare apprentices for their end-point assessment, and Highfield recommends that the apprentice experiences a mock evidence portfolio and interview in preparation for the real thing. The most appropriate form of mock evidence portfolio and interview will depend on the apprentice's setting and the resources available at the time.

In designing a mock assessment, the employer/training provider should include the following elements in its planning:

- the mock interview should take place in a suitable location.
- a 60-minute time slot should be available to complete the interview if it is intended to be a complete interview covering all relevant standards. However, this time may be split up to allow for progressive learning.
- consider a video or audio recording of the mock interview and allow it to be available to other apprentices, especially if it is not practicable for the employer/training provider to carry out a separate mock assessment with each apprentice.
- ensure that the apprentice's performance is assessed by a competent trainer/assessor, and that feedback is shared with the apprentice to complete the learning experience. Mock assessment sheets are available to download from the Highfield Assessment website and may be used for this purpose.
- use structured 'open' questions that do not lead the apprentice but allows them to express their knowledge and experience in a calm and comfortable manner. For example:
 - O How do you communicate effectively with individuals?
 - o How do you follow local and national policies when handling information?
 - What is your understanding of the term 'frailty' and how have you supported with this?
 - Tell me about how you have dealt with a problem or task that you were uncertain of?
 - o How do you maintain a healthy and safe environment?
 - Tell me about a time when you have shown honesty to individuals you are supporting.



Evidence Portfolio and Interview Criteria

The evidence portfolio and interview combined assessment, evidence what the apprentice has achieved during the apprenticeship, covering the following areas of the apprenticeship standard. All must be covered to pass this assessment method:

Pass Assessment Criteria

Communication

EPI1.1 Communicate effectively with individuals, their families, carers and healthcare practitioners using a range of techniques, keeping information confidential

EPI1.2 Handle information (record, report and store information) related to individuals in line with local and national policies

Pass Assessment Criteria

Health intervention

- EPI2.1 Support individuals with long term conditions, frailty and end of life care
- EPI2.2 Identify and respond to signs of pain or discomfort
- EPI2.3 Promote physical health and wellbeing of individuals
- EPI2.4 Assist with an individuals' overall comfort and wellbeing
- EPI2.5 Support individuals with activities of daily living
- EPI2.6 Recognise deteriorations in health, long term conditions, physiological measurements, skin integrity
- EPI2.7 Report changes in physical and mental health needs

Pass Assessment Criteria

Dementia, cognitive issues and mental health:

- EPI2.8 Promote mental and physical health and wellbeing
- EPI2.9 Recognise limitations in mental capacity and respond appropriately
- EPI2.10 Recognise and respond to signs of poor mental health for example dementia, depression, anxiety or other cognitive issues

Pass Assessment Criteria

Basic life support

EPI2.11 Perform basic life support for individuals using appropriate resuscitation techniques and equipment in a simulated situation



Pass Assessment Criteria

Physiological measurements

EPI2.12 Undertake a range of physiological measurements using the appropriate equipment including height, weight, temperature, pulse, breathing rate and blood pressure

Pass Assessment Criteria

Personal and people development

- EPI3.1 Take responsibility for, prioritise and reflect on your own actions and work
- EPI3.2 Work as part of a team, seeking help and guidance when you are not sure
- EPI3.3 Maintain and further develop your own skills and knowledge through development activities
- EPI3.3 Maintain evidence of your personal development and actively prepare for and participate in appraisal

Pass Assessment Criteria

Health, safety and security

- EPI4.1 Maintain a safe and healthy working environment
- EPI4.2 Take appropriate action in response to incidents or emergencies following local guidelines

Pass Assessment Criteria

Infection prevention and control

EPI4.3 Use a range of techniques for infection prevention and control including waste management, handwashing and the use of Personal Protective Equipment (PPE)

Pass Assessment Criteria

Moving and handling

EPI4.4 Move and position individuals, equipment and other items safely

Pass assessment criteria

Value - Care

EPI5.1: Be caring and compassionate



Pass assessment criteria

Value - Honesty

EPI5.2: Be honest

Pass assessment criteria

Value - Commitment

EPI5.3: Be conscientious and committed

Pass assessment criteria

Behaviour - Treating people with dignity, respecting individual's diversity, beliefs, culture, values, needs, privacy and preferences

EPI6.1 - Treat people with dignity, respecting individual's diversity, beliefs, culture, values, needs, privacy and preferences

Pass assessment criteria

Behaviour - Respect and Empathy

EPI6.2 - Show respect and empathy for those you work with

Pass assessment criteria

Behaviour - Courage to challenge areas of concern and work to best practice

EPI6.3 - Have the courage to challenge areas of concern and work to best practice

Pass assessment criteria

Behaviour - Adaptable reliable and consistent

EPI6.4 - Be adaptable, reliable and consistent

Pass assessment criteria

Behaviour - Discretion

EPI6.5 - Show discretion towards others

Pass assessment criteria

Behaviour - Self-awareness

EPI6.6 - Show self-awareness



Pass assessment criteria

Behaviour - Resilience

EPI6.7 - Show resilience

Additional Pass Criteria

Pass assessment criteria

P1 The portfolio comprises a range of valid sources of evidence

P2 The portfolio contains 2 short reflective accounts that show **satisfactory** evidence and ability to relate concepts and theories to practice and/or when answering questions during the interview.

Additional Merit Criteria

Merit assessment criteria

M1 Provide evidence of enhanced understanding through wider reading

Additional Distinction Criteria

Distinction assessment criteria

D1 The portfolio comprises a creative range of valid sources of evidence

D2 The portfolio contains reflective accounts showing evidence of relating concepts and theories to practice and ability to make connections between **learning and future practice** and/or when answering questions during the interview.

D3 Is able to engage in **wider discussion** demonstrating understanding of concepts and theories achieved through **extensive reading**

Click here to return to contents

