



L-Università
ta' Malta

MATSEC
Examinations Board



SEC 36 Syllabus

Health and Social Care

2028

Table of Contents

Introduction	2
Programme Learning Outcomes	2
Unit Learning Outcomes.....	3
Programme Level Descriptors	4
Interpreting the Syllabus.....	5
Unit Structure.....	5
Assessment Criteria.....	5
Content.....	5
Scheme of Assessment	6
School-based assessment (SBA)	6
Coursework	6
Controlled Assessment.....	7
Unit 1: Effective Communication, Human Development and Holistic Care	8
Unit Description.....	8
Learning Outcomes	8
Assessment Criteria and Content	9
Learning Outcomes and Assessment Criteria.....	15
Unit 2: Anatomy, Physiology, Health and Safety in Health & Social Care.....	20
Unit Description.....	20
Learning Outcomes	20
Assessment Criteria and Content	21
Learning Outcomes and Assessment Criteria.....	28
Unit 3: Equality, Diversity and Quality Care.....	33
Unit Description.....	33
Learning Outcomes	33
Assessment Criteria and Content	34
Learning Outcomes and Assessment Criteria.....	38
Appendix 1 – Minimum Required Resources.....	42
Appendix 2 – Portfolio Marking Schemes.....	44

Introduction

This syllabus is based on the curriculum principles outlined in *The National Curriculum Framework for All* (NCF) which was translated into law in 2012 and designed using the *Learning Outcomes Framework* that identify what students should know and be able to achieve by the end of their compulsory education.

As a learning outcomes-based syllabus, it addresses the holistic development of all learners and advocates a quality education for all as part of a coherent strategy for lifelong learning. It ensures that all children can obtain the necessary skills and attitudes to be future active citizens and to succeed at work in society irrespective of socio-economic, cultural, racial, ethnic, religious, gender and sexual status. This syllabus provides equitable opportunities for all learners to achieve educational outcomes at the end of their schooling which will enable them to participate in lifelong and adult learning, reduce the high incidence of early school leaving, and ensure that all learners attain key twenty-first century competences.

This programme also embeds learning outcomes related to cross-curricular themes, namely digital literacy; diversity; entrepreneurship creativity and innovation; sustainable development; learning to learn; and cooperative learning and literacy. This way students will be fully equipped with the skills, knowledge, attitudes and values needed to further learning, work, life and citizenship.

The aim of the vocational programme in Health and Social Care is to provide students with the underpinning knowledge related to the Health and Social Care. By the end of the programme, students are expected to have gained sufficient skills and knowledge and be able to apply them.

Programme Learning Outcomes

At the end of the programme, I can:

- Demonstrate an understanding of the basic anatomy and physiology of the human body and the effects of a number of common health problems on the body's normal functions.
- Demonstrate an understanding of the Health and Social Care needs of different groups of people and show awareness of different types of services that can be offered to meet their personal care needs.
- Demonstrate proper communication skills when addressing different individuals.
- Demonstrate awareness of the Health and Safety issues that may arise in different environments with reference to Health and Safety legislation.
- Examine issues of equality, discrimination, dignity and rights, and explore own attitudes, beliefs and thoughts regarding such issues.
- Demonstrate awareness of the different practitioners who work in the Health and Social Care sector.
- Develop the right attitude and skills required in the Health and Social Care environment.

Unit Learning Outcomes

Unit 1: Effective Communication, Human Development and Holistic Care

At the end of the unit, I can:

- LO 1.** Demonstrate an understanding of the different contexts of communication.
- LO 2.** Demonstrate communication skills in one-to-one and group interactions.
- LO 3.** Meet individual needs at different life stages.
- LO 4.** Demonstrate an understanding of the factors that influence the health and wellbeing of individuals.
- LO 5.** Develop a plan to meet the general health and wellbeing needs of an individual.

Unit 2: Anatomy, Physiology, Health and Safety in Health & Social Care

At the end of the unit, I can:

- LO 6.** Demonstrate an understanding of the organisation of the human body and the interrelationship of major body systems.
- LO 7.** Measure vital signs and interpret the results obtained.
- LO 8.** Demonstrate an understanding of potential hazards in Health and Social Care and how legislation promotes health, safety and security.
- LO 9.** Demonstrate an understanding of the activities of daily living and how their application improves quality of care.
- LO 10.** Demonstrate knowledge of basic First Aid skills.

Unit 3: Equality, Diversity and Quality Care

At the end of the unit, I can:

- LO 11.** Demonstrate an understanding of the concept of diversity underpinning Health and Social Care.
- LO 12.** Demonstrate an understanding of the role of legislation and organisations in promoting anti-discriminatory practice and equality.
- LO 13.** Demonstrate an understanding of the rights of individuals accessing Health and Social Care services.
- LO 14.** Demonstrate an understanding of the social service principles and the provision of quality care.

Programme Level Descriptors

This syllabus sets out the content and assessment arrangements for the award of Secondary Education Certificate in Health and Social Care at Level 1, 2 or 3. First teaching of this programme begins in September 2024. First award certificates will be issued in 2027.

The following levels refer to the qualification levels that can be obtained by candidates sitting for SEC examinations. These are generic statements that describe the depth and complexity of each level of study required to achieve an award at Level 1, 2 or 3 in Health and Social Care. (Level 1 being the lowest and Level 3 the highest).

Level 1: At the end of the programme the candidate will have obtained basic knowledge, skills and competences in the subject such as basic repetitive communication skills and the ability to follow basic, simple instructions to complete tasks. Support is embedded within the task.

Level 2: At the end of the programme the candidate will have obtained good knowledge, skills and competence in the subject such as the interpretation of given information and ideas. The candidate will have developed the ability to carry out complex tasks. Limited support may be embedded within the task.

Level 3: At the end of the programme the candidate will autonomously apply knowledge and skills to a variety of complex tasks. Candidates will utilise critical thinking skills to analyse, evaluate and reflect upon their own work and that of others. Problem solving tasks may be part of the assessment process.

Interpreting the Syllabus

This document is an assessment syllabus. Whilst the content provided is the minimum expected for assessment purposes, the provision of further examples or information is encouraged – although not mandatory – for students to enjoy the learning process and get a better overview of the subject.

Unit Structure

The various learning outcomes, assessment criteria, and content are grouped under three units. Each unit is presented in the following structure:

- Title
- Description
- Learning Outcomes
- Assessment Criteria and Content
- Learning Outcomes and Assessment Criteria

Educators may devise their own plan for content delivery across the years of study. They may choose to follow the unit learning outcomes and content structure as presented in the syllabus, and conclude each unit by the end of every scholastic year, or follow a different order which in their professional view would be more conducive to learning of any particular subject area or topic. However, by the end of the three-year programme in Year 11, all content delivery and continuous assessment should be completed, in time for submission to MATSEC in the indicated time-frames and format.

Assessment Criteria

The active verb used in assessment criteria (such as list, identify, outline, describe, explain, etc...) indicates what candidates are expected to know or be able to do. It also provides direction with respect to expected complexity in the candidates' responses or work. These verbs are defined in the Glossary of Terms available on the MATSEC website. Application criteria are to be interpreted in terms of Bloom's taxonomy psychomotor domain.

Content

For each assessment criterion, only the minimum content that needs to be covered is listed. Examples (e.g.), commas, semi-colons, bullets, 'or', and 'N.B.' are used for presentation and guidance purposes only. While all the material reflecting both the unit content and the assessment criteria is to be delivered, this will not necessarily be assessed by MATSEC in its entirety, as indicated in the Scheme of Assessment. Where the plural is used in any assessment criterion (e.g. types, aspects, steps, etc.), two or more answers are usually expected, although this may not always be the case.

Scheme of Assessment

The assessment of this subject follows the Secondary Education Certificate Regulations and the MATSEC Assessment Code of Practice governing each respective cohort. It shall be based on three components, each of which contributes towards the overall subject mark as follows:

COMPONENT	LEVEL WEIGHT (OVERALL SUBJECT MARK)
SBA (Paper I)	30%
Coursework (Portfolio)	30%
Controlled assessment (Paper II)	40%

Candidates have to attempt all three assessment components, and fulfil the set criteria in the coursework component and Paper II, to obtain a level higher than Level 1.

Individuals may not register as private candidates in this subject, unless they are resitting the subject in a subsequent Main Session. In the latter case, marks obtained in the SBA and the coursework can be carried forward for up to five years from the first sitting.

School-based assessment (SBA)

SBA (Paper I) refers to the assessment of the application criteria specified in the syllabus, assigned to candidates and marked by school teachers. This component is unmoderated.

SBA should be set at Level 1-2-3, following a 30-30-40 percentage mark allocation, with Level 3 carrying the highest marks.

The SBA should be marked out of 100 each year (9, 10, and 11). The assessment for each year will contribute to 10% of the overall subject mark and will be reported to MATSEC by the school when the candidate is in Year 11. Therefore, each year will equally contribute to the final 30% mark of the SBA.

SBA SUBMISSION TO MATSEC IN YEAR 11			LEVEL WEIGHT (OVERALL SUBJECT MARK)
Year 9	Year 10	Year 11	30%
[0 to 100] marks	[0 to 100] marks	[0 to 100] marks	

Coursework

Coursework in this subject refers to a Portfolio, divided in three parts carried out across the three-year programme, which will be set and marked by the teacher following the templates downloadable from the MATSEC website and the marking schemes included as an appendix in the syllabus. This component is moderated.

Each coursework part will be marked out of 60 and will be set at Level 1-2-3. The assessment of each part will contribute to 10% of the overall mark and will be reported to MATSEC by the school when the candidate is in Year 11. Therefore, each part will equally contribute to the final 30% mark of coursework.

The school is to upload a digital copy of their candidates' coursework on the MATSEC portal by the date established by the MATSEC Board and ensure that all coursework is available as instructed. Candidates may be called for an interview in relation to their coursework.

Candidates are to fulfil the set criteria in this assessment component to obtain a level higher than Level 1.

COURSEWORK SUBMISSION TO MATSEC IN YEAR 11 FOR MODERATION			LEVEL WEIGHT (OVERALL SUBJECT MARK)
Part 1	Part 2	Part 3	30%
Based on any TWO application criteria from Unit 1	Based on any TWO application criteria from Unit 2	Based on any ONE application criterion from Unit 3 and a Self-Evaluation	
[0 to 60] marks	[0 to 60] marks	[0 to 60] marks	

Controlled Assessment

The controlled assessment (Paper II) comprises a two-hour written exam set and marked by MATSEC at the end of the three-year programme.

The paper will carry a total of 100 marks and will be set at Level 1-2-3. It will include questions based on a number of knowledge or comprehension criteria from different units, learning outcomes and levels.

Attainment in this component will be reported by MATSEC as a Grade using an 8-point scale and will contribute towards 40% of the marks in determining the overall level.

Candidates are to fulfil the set criteria in this assessment component to obtain a level higher than Level 1.

CONTROLLED ASSESSMENT IN YEAR 11	LEVEL WEIGHT (OVERALL SUBJECT MARK)
Two-hour exam paper	40%
[0 to 100] marks	

Unit 1: Effective Communication, Human Development and Holistic Care

Unit Description

This unit will enable candidates to gain the knowledge, understanding and practical skills they need to be able to communicate successfully within Health and Social Care contexts. Throughout this unit candidates will investigate and learn about different forms of communication, understand barriers to communication and be able to communicate effectively.

Due to the wide range of care settings available in Malta, the candidate needs to understand human growth and development through the different life stages and the resultant needs. Candidates also need to understand the effect of life factors and events on an individual's needs, health and wellbeing. For example, during birth and infancy candidates will explore the rapid changes that a baby progresses through. In childhood, candidates will look at the development of physical skills and life changing events such as the birth of a sibling. In adolescence, puberty, self-esteem, peer pressure and risk-taking (e.g. drugs and alcohol) will be taken into account. In adulthood life-changing events (such as marriage and employment) will be considered along with the physical and psychological effects of growing old. The effects of bereavement and the loss of a partner will also be covered. The impact of disability will be examined. Candidates will have the opportunity to learn how to wash and feed babies and persons with mobility problems.

Knowledge and understanding of the needs of individuals is fundamental to delivering holistic Health and Social Care. An introduction to needs will challenge candidates to consider how these vary at different life stages of human growth and development: birth and infancy, childhood, adolescence, adulthood and old age.

Additionally, candidates will carry out a basic assessment of an individual's general health and wellbeing and develop a plan to meet his/her health and wellbeing needs.

Learning Outcomes

At the end of the unit, I can:

- LO 1.** Demonstrate an understanding of the different contexts of communication.
- LO 2.** Demonstrate communication skills in one-to-one and group interactions.
- LO 3.** Meet individual needs at different life stages.
- LO 4.** Demonstrate an understanding of the factors that influence the health and wellbeing of individuals.
- LO 5.** Develop a plan to meet the general health and wellbeing needs of an individual.

Assessment Criteria and Content

Subject Focus	Contexts of communication		
LO 1.	Demonstrate an understanding of the different contexts of communication.		
K-1.	K-1. Identify the sender and the receiver.	K-1. Label the stages of the communication cycle.	K-1. Outline the communication cycle.
	Stages of the communication cycle: ideas occur; message encoded; message sent; message received and decoded; feedback to sender.		
K-2.	K-2. List different contexts for communication.	K-2. Distinguish when to use different contexts of communication.	K-2. Identify different contexts for communication with different individuals in a given scenario.
	Different contexts for communication: one-to-one; group; formal; informal.		
	Individuals: service-users; colleagues; managers; other individuals.		
C-1.	C-1. Define one-way and two-way communication.	C-1. Differentiate when to use one-way and two-way communication in a given scenario.	C-1. Describe the advantages of face-to-face communication.
	One-way and two-way communication: <ul style="list-style-type: none"> One-way communication: prescription; hospital record; logbooks; giving/receiving instructions; Two-way communication: face-to-face conversations; telephone conversations; counselling; consultation. 		
	Advantages of face-to-face communication: immediate confirmation of understanding; improved negotiation; observation of non-verbal communication; congruence between verbal and non-verbal message.		

Subject Focus	Effective one-to-one and group interactions		
LO 2.	Demonstrate communication skills in one-to-one and group interactions.		
K-3.	K-3. Mention benefits for effective group communication.	K-3. Match different forms of communication with their corresponding examples.	K-3. Describe the different forms of communication, giving an example of each form.
	Benefits for effective group communication: recognising when using formal and informal communication; active listening; turn taking; decoding appropriately non-verbal skills; respecting others' opinions and being assertive.		
	<p>Forms of communication</p> <ul style="list-style-type: none"> • Verbal: e.g. greeting, checking for understanding, probing, empathy, confrontation, constructive feedback, summarization, termination; • Non-verbal: e.g. facial expressions, eye contact, gestures, touch, posture, proximity, tone of voice, speech pace; • Written*: e.g. incident reports, journals, contact book, policies and procedures, memos, medical records, telephone notes, prescriptions or referrals; • Augmentative and/or alternative: e.g. sign language, lip reading, flash cards, signs and symbols, key word signing, picture exchange communication system, Braille, electronic devices, computer applications specific for certain needs. <p><i>*N.B. It is recommended that during lessons reference to clarity, objectivity, accuracy and legibility is made.</i></p>		
K-4.	K-4. Define what is meant by barriers to communication.	K-4. Identify the barriers to effective communication within a Health and Social Care environment.	K-4. Describe the effects of different barriers on both the sender and the receiver.
	Barriers to effective communication: e.g. disability, speech difficulties, foreign language and cultural differences, jargon, emotional and behavioural difficulties, mental health problems and dementia, environmental problems, differing sense of humour, illegibility.		
	Effects of barriers on the sender and receiver: misunderstanding; mistakes; confusion; frustration; offence.		
C-2.	C-2. Outline benefits of group interactions.	C-2. Describe the importance of the given verbal and non-verbal communication skills in one-to-one interactions.	C-2. Explain the consequences of not using the appropriate verbal and non-verbal communication skills in a given one-to-one interaction.
	<p>N.B. For Level 2 no scenario should be given.</p> <p>N.B. For Level 3 a scenario should be given.</p>		

C-3.	C-3. Identify ways to overcome barriers to communication.	C-3. Describe ways to overcome barriers to communication.	C-3. Explain ways to overcome barriers to communication with a person with specific needs.
	Overcoming communication barriers: e.g. adapting the environment, understanding language needs and preferences, using the individual's preferred language, timing, electronic devices (text phones, telephone amplifiers, hearing loops), effective non-verbal communication.		
	Persons with specific needs: dementia or stroke or wheelchair users or hearing impairment or visual impairment or speech impairment. N.B. For Level 3 for assessment purposes ONE specific need should be taken from the list above.		
A-1.	A-1. Participate in a group interaction using basic competences.	A-1. Participate in a spontaneous one-to-one interaction using verbal communication skills.	A-1. Participate in a spontaneous one-to-one interaction using non-verbal communication skills.
	Competences: active listening; turn taking; respecting others' opinions. N.B. For assessment purposes, the teacher should present the topic for the group interaction during the assessment session.		
	Communication skills: <ul style="list-style-type: none"> Verbal: e.g. greeting; probing; checking for understanding; summarisation; termination; constructive feedback, empathy, confrontation. Non-verbal: e.g. facial expression; eye contact; posture; proximity; tone of voice, gestures, touch, speech pace. N.B. The same one-to-one interaction should assess both Level 2 and Level 3.		

Subject Focus	Human development and individual needs		
LO 3.	Meet individual needs at different life stages.		
K-5.	K-5. List the key aspects of human growth and development of a life stage.	K-5. Match developmental changes to each specific life stage.	K-5. Describe the key aspects of development at a particular life stage.
	Key aspects of human growth and development: physical; intellectual; emotional; social.		
	N.B. For assessment purposes the life stages referred to in Level 1 include: Infancy (0 – 3 years); childhood (4 – 10 years); adolescence (11 – 18 years); adulthood (19 – 65 years); old age (65 years onwards) N.B. For assessment purposes at Level 2, TWO developmental changes should be matched to each specific life stage.		

K-6.	K-6. List the Physical, Intellectual, Emotional and Social needs.	K-6. Outline the Physical, Intellectual, Emotional and Social Needs at a particular life stage.	K-6. Describe the consequences that will follow if the needs of a particular individual are not met.
	Individual needs: <ul style="list-style-type: none">Physical: balanced diet; exercise; warmth; safety; rest;Intellectual: communication; learning; problem solving; creativity; exploration;Emotional: love; affection; feeling valued; security; support;Social: interaction with family; interaction with extended-family; interaction with friends; participation in activities; adapting to new environments and acquaintances.		
	Consequences if needs of a particular individual are not met: <ul style="list-style-type: none">Physical: e.g. stunted growth, illness, death;Intellectual: e.g. late language development, slow learning, apathy towards learning;Emotional: e.g. attachment problems, helplessness and frustration, low self-esteem;Social: e.g. inability to make friends, lack of social skills, strained relationship.		
C-4.	C-4. State the meaning of infection control.	C-4. State infection control measures to be taken into consideration when meeting the physical needs of individuals.	C-4. Discuss the consequences of not following infection control measures when meeting the physical needs of individuals in a given scenario.
	Infection control measures to meet physical needs of an individual: hand washing; gloves; aprons; face mask; not sharing equipment and personal possessions (such as face cloth, towels, soap).		
	Consequence of not following infection control measures: infecting oneself; infecting clients; cross-infecting other clients; death.		
A-2.	A-2. Prepare equipment for washing a baby mannequin.	A-2. Prepare a baby mannequin for bathing.	A-2. Dress a baby mannequin after washing.
	Preparation of equipment for washing a baby mannequin: the bath; suitable soap shampoo and baby lotion for washing baby; soft face cloth or sponge; supply changing area with clean nappies, wipes and appropriate creams; towel; clothes.		
	Prepare the baby for bathing: not leaving baby alone at any time; handling; undressing; wash hands and/or wear gloves; clean the baby; disposal of soiled nappy, wipes and gloves.		
	Dressing a baby mannequin after washing: prepare the tub with about 3 inches (7 cm) of warm water; check bath temperature; wrap the baby firmly in a towel enclosing the arms; wash the baby; rinse the baby; dry baby; apply nappy; dress the baby.		
A-3.	A-3. Prepare a feed for an adult with swallowing difficulties.	A-3. Prepare a healthy and colourful plate for an individual with particular needs.	A-3. Feed a person who has just suffered a stroke.
	Preparation of feed for an adult with swallowing difficulties: add thickener; stir; check for consistency.		
	Preparation of a plate suitable for an individual with particular needs: good presentation of food on plate; healthy for the individual according to the nutritional needs; consistency of food; suitable according to the individual's feeding needs.		
	Feeding a person who has just suffered a stroke: proper sitting position of individual; protective bib for individual; small portions at a time; give choice to individual's food preference.		
	N.B. It is highly recommended that during delivery the following points are taught: to avoid hovering with the next spoonful of food as this may cause an individual to hurry and worsen any swallowing difficulties, and that the individual should remain upright for 15 minutes after feeding.		

Subject Focus	Factors that influence the health and wellbeing of individuals		
LO 4.	Demonstrate an understanding of the factors that influence the health and wellbeing of individuals.		
K-7.	K-7. List the different life factors which influence the health and wellbeing of individuals.	K-7. Outline the different life factors which influence the health and wellbeing of individuals, giving an example for each of the life factors.	K-7. Describe how different life factors impact the health and wellbeing of an individual in a given scenario.
	<p>Life factors and examples:</p> <ul style="list-style-type: none"> • Socio-economic factors: social class or culture or employment or education or housing; • Physical factors: genetic inheritance or disability or age or gender; • Lifestyle factors: diet or exercise or smoking/substance misuse or working pattern/stress or social and community networks; • Health factors: infection or sexually transmitted diseases or injury or mental health or presence of chronic disorder. <p>N.B. For assessment purposes at Level 3, the way TWO different life factors affect the health and wellbeing of an individual should be described.</p>		
K-8.	K-8. Name the life events which influence the health and wellbeing of individuals.	K-8. Outline how different life events affect individuals.	K-8. Identify the positive and negative influences which a specific life event may have on the health and wellbeing of a particular individual.
	Life events: e.g. birth of a sibling/son/daughter, going to nursery/school, employment/redundancy, marriage/divorce, serious injury, ageing, retirement, bereavement.		
C-5.	C-5. Identify how a particular life event affects all the needs (PIES) of an individual.	C-5. Compare and contrast a specific life event as portrayed by the media to that experienced by an individual in real life.	C-5. Discuss how a particular life event affects all the life factors in a particular scenario.
	How life events are portrayed by the media: false image of life; incomplete depiction of life.		

Subject Focus	Assessment and plan to meet the health and wellbeing needs of an individual		
LO 5.	Develop a plan to meet the general health and wellbeing needs of an individual.		
K-9.	K-9. State what wellbeing is according to the WHO definition.	K-9. List the components of a healthy lifestyle.	K-9. Outline the components of a healthy lifestyle.
	Components of a healthy lifestyle: physical fitness; a balanced diet; intellectual stimulation; emotional and social wellbeing.		
K-10.	K-10. State the reason for assessing the health and well-being of a person.	K-10. Identify which components of a healthy lifestyle are being neglected in a given scenario.	K-10. Prepare a short-term and/or long-term plan for an individual in a given scenario.
	Reason for assessing the health and well-being of a person: identification of unmet needs; planning interventions to meet the needs.		
	N.B It is highly recommended that candidates are taught SMART targets for a health plan: Specific; Measurable; Achievable; Realistic; Time-related.		

Learning Outcomes and Assessment Criteria

Subject Focus:	Contexts of communication
Learning Outcome 1:	Demonstrate an understanding of the different contexts of communication.

Knowledge Criteria			Comprehension Criteria			Application Criteria		
Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)
K-1. Identify the sender and the receiver.	K-1. Label the stages of the communication cycle.	K-1. Outline the communication cycle.	C-1. Define one-way and two-way communication.	C-1. Differentiate when to use one-way and two-way communication in a given scenario.	C-1. Describe the advantages of face-to-face communication.			
K-2. List different contexts for communication.	K-2. Distinguish when to use different contexts of communication.	K-2. Identify different contexts for communication with different individuals in a given scenario.						

Subject Focus:	Effective one-to-one and group interactions
Learning Outcome 2:	Demonstrate communication skills in one-to-one and group interactions.

Knowledge Criteria			Comprehension Criteria			Application Criteria		
Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)
K-3. Mention benefits for effective group communication.	K-3. Match different forms of communication with their corresponding examples.	K-3. Describe the different forms of communication, giving an example of each form.	C-2. Outline benefits of group interactions.	C-2. Describe the importance of the given verbal and non-verbal communication skills in one-to-one interactions.	C-2. Explain the consequences of not using the appropriate verbal and non-verbal communication skills in a given one-to-one interaction.	A-1. Participate in a group interaction using basic competences.	A-1. Participate in a spontaneous one-to-one interaction using verbal communication skills.	A-1. Participate in a spontaneous one-to-one interaction using non-verbal communication skills.
K-4. Define what is meant by barriers to communication.	K-4. Identify the barriers to effective communication within a Health and Social Care environment.	K-4. Describe the effects of different barriers on both the sender and the receiver.	C-3. Identify ways to overcome barriers to communication.	C-3. Describe ways to overcome barriers to communication.	C-3. Explain ways to overcome barriers to communication with a person with specific needs.			

Subject Focus:	Human development and individual needs
Learning Outcome 3:	Meet individual needs at different life stages.

Knowledge Criteria			Comprehension Criteria			Application Criteria		
Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)
K-5. List the key aspects of human growth and development of a life stage.	K-5. Match developmental changes to each specific life stage.	K-5. Describe the key aspects of development at a particular life stage.	C-4. State the meaning of infection control.	C-4. State infection control measures to be taken into consideration when meeting the physical needs of individuals.	C-4. Discuss the consequences of not following infection control measures when meeting the physical needs of individuals in a given scenario.	A-2. Prepare equipment for washing a baby mannequin.	A-2. Prepare a baby mannequin for bathing.	A-2. Dress a baby mannequin after washing.
K-6. List the Physical, Intellectual, Emotional and Social needs.	K-6. Outline the Physical, Intellectual, Emotional and Social Needs at a particular life stage.	K-6. Describe the consequences that will follow if the needs of a particular individual are not met.				A-3. Prepare a feed for an adult with swallowing difficulties.	A-3. Prepare a healthy and colourful plate for an individual with particular needs.	A-3. Feed a person who has just suffered a stroke.

Subject Focus:	Factors that influence the health and wellbeing of individuals
Learning Outcome 4:	Demonstrate an understanding of the factors that influence the health and wellbeing of individuals.

Knowledge Criteria			Comprehension Criteria			Application Criteria		
Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)
K-7. List the different life factors which influence the health and wellbeing of individuals.	K-7. Outline the different life factors which influence the health and wellbeing of individuals, giving an example for each of the life factors.	K-7. Describe how different life factors impact the health and wellbeing of an individual in a given scenario.	C-5. Identify how a particular life event affects all the needs (PIES) of an individual.	C-5. Compare and contrast a specific life event as portrayed by the media to that experienced by an individual in real life.	C-5. Discuss how a particular life event affects all the life factors in a particular scenario.			
K-8. Name the life events which influence the health and wellbeing of individuals.	K-8. Outline how different life events affect individuals.	K-8. Identify the positive and negative influences which a specific life event may have on the health and wellbeing of a particular individual.						

Subject Focus:	Assessment and plan to meet the health and wellbeing needs of an individual
Learning Outcome 5:	Develop a plan to meet the general health and wellbeing needs of an individual.

Knowledge Criteria			Comprehension Criteria			Application Criteria		
Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)
K-9. State what wellbeing is according to the WHO definition.	K-9. List the components of a healthy lifestyle.	K-9. Outline the components of a healthy lifestyle.						
K-10. State the reason for assessing the health and well-being of a person.	K-10. Identify which components of a healthy lifestyle are being neglected in a given scenario.	K-10. Prepare a short-term and/or long-term plan for an individual in a given scenario.						

Unit 2: Anatomy, Physiology, Health and Safety in Health & Social Care

Unit Description

This unit will introduce candidates to the knowledge and understanding of how the body works: the organisation of the human body, the major body systems and the fact that body systems do not function in isolation but work together in maintaining the body as a whole, with the health of the individual depending on this.

The unit allows candidates to explore how to take and record basic clinical measurements such as temperature, pulse, breathing rate and blood pressure. This knowledge will help them understand the routine procedures that take place in Health and Social Care environments, including the monitoring of body systems.

Within Health and Social Care environments there are many hazards that need to be identified, communicated and controlled to ensure a safe environment for everyone using the services. The unit enables candidates to explore the knowledge and skills related to Health and Safety issues, including Health and Safety legislation, risk assessment and the actions that are necessary to minimise potential hazards and risks.

Furthermore, the unit will give candidates a basic understanding of First Aid: summoning help or taking action to help a person in distress or preventing further damage in the event of an accident or injuries

Learning Outcomes

At the end of the unit, I can:

- LO 6.** Demonstrate an understanding of the organisation of the human body and the interrelationship of major body systems.
- LO 7.** Measure vital signs and interpret the results obtained.
- LO 8.** Demonstrate an understanding of potential hazards in Health and Social Care and how legislation promotes health, safety and security.
- LO 9.** Demonstrate an understanding of the activities of daily living and how their application improves quality of care.
- LO 10.** Demonstrate knowledge of basic First Aid skills.

Assessment Criteria and Content

Subject Focus	Organs and main body systems		
LO 6.	Demonstrate an understanding of the organisation of the human body and the interrelationship of major body systems.		
K-11.	K-11. Label the key organs of the human body.	K-11. Identify the position of the key organs in the human body.	K-11. Outline the key organs in the human body and their core function.
	<p>Key organs of the human body: e.g. skin (protection of organs), heart (pumping of blood), lungs (breathing), brain (responsible for thought and coordination), eyes (responsible for sight), nose (responsible for smell and taste), ear (responsible for hearing), stomach (breaking down of food), pancreas (production of hormones to regulate level of sugar in the blood), liver (responsible for filtration of blood), kidneys (removal of waste products and regulating water fluid levels), intestines (absorption of nutrients), ovaries (production of ova and reproductive hormones), testes (production of sperm and reproductive hormones), uterus (houses and nourishes the foetus).</p> <p>N.B. It is highly recommended that before delivering the content found in this criterion, the organisation of cells, tissues, organs and systems is covered.</p>		
K-12.	K-12. List the main systems of the human body.	K-12. Name key organs within the main systems of the human body.	K-12. Outline the main systems in the human body with their main function.
	Main systems of the human body: e.g. cardiovascular/circulatory system, respiratory system, digestive system, renal system, musculoskeletal system, nervous system.		
C-6.	C-6. Name which systems interact with each other in the human body.	C-6. Describe how different systems interact with each other.	C-6. Explain how different systems interact with each other in a given scenario.
	<p>Relationships between major body systems: cardiovascular/circulatory and respiratory systems or musculoskeletal and Nervous systems.</p> <p>N.B. For assessment purposes at Level 2, the description of the way systems interact should also include the different organs involved.</p>		

Subject Focus	Vital signs			
LO 7.	Measure vital signs and interpret the results obtained.			
K-13.	K-13. Name the vital signs of the human body.	K-13. Determine the normal range of the vital signs of a particular individual.	K-13. Interpret the readings of the vital signs from nursing observation sheets.	
	Vital signs of the human body: body temperature; pulse; breathing rate; blood pressure.			
	Readings of vital signs (at rest):			
		Baby (1 – 5 years)	Adult	Older Adult
	Blood Pressure	95/65mmHg (+/- 20);	120/80mmHg (+/- 20)	130/85mmHg (+/- 20)
	Temperature	36°C to 37.5°C	36°C to 37.5°C	36°C to 37.5°C
Pulse	115 beats per minute (+/- 20)	80 beats per minute (+/- 20)	70 beats per minute (+/- 20)	
Breathing Rate	28 breaths per minute (+/- 8)	18 breaths per minute (+/- 8)	15 breaths per minute (+/- 8)	
<i>N.B. For assessment purposes at Level 3, candidates are expected to only indicate whether the readings are high, low, or within expected range for each vital sign.</i>				
K-14.	K-14. List a sign/symptom that might be present when readings of each vital sign are outside the acceptable range.	K-14. Outline a consideration that must be taken before measurements of each vital sign are taken.	K-14. Indicate the underlying factors that influence the reading of the vital signs.	
	Signs/symptoms of vital sign readings outside the acceptable range: skin colour and texture or feeling hot or feeling cold or irregular breathing rhythm or dizziness or thirst or dehydration or fainting or coughing or wheezing.			
	<i>N.B. For assessment purposes, candidates should give a sign/symptom that might be present when the reading of EACH vital sign is above and below the normal range. (Symptoms may be repeated).</i>			
	Considerations before measuring vital signs: <ul style="list-style-type: none">Blood Pressure: settle patient down, reassure him/her and ensure individual is at rest.Temperature: assess the most adequate place from where to take the reading;Pulse: ask individual whether s/he is an athlete or not;Breathing: ensure individual is not aware that breathing rate is being measured.			
	Underlying factors influencing the reading of vital signs: e.g. <ul style="list-style-type: none">High blood pressure: narrowing of blood vessels,Low blood pressure: dilated blood vessels,High body temperature: infection,Low body temperature: extreme exposure to cold,Rapid pulse: heart condition,Slow heartbeat: heart condition,Irregular breathing: lung condition.			

C-7.	C-7. List the most common physiological reasons why the readings of the vital signs might not be within the acceptable range.	C-7. Outline the importance of taking measurements of the vital signs.	C-7. Describe the most common physiological reasons why the readings of the vital signs might not be within the acceptable range.
	Common physiological reasons why the readings of the vital signs might not be within the acceptable range: e.g. family history, age, diet, being active/fit, infections.		
	Importance of taking measurements of the vital signs: provide important feedback about the body's functions; detect medical problems; monitor medical problems or recovery following surgery; vital signs might indicate the necessity for further testing.		
A-4.	A-4. Choose the correct equipment to measure the vital signs by taking into consideration the individual's needs.	A-4. Take the necessary precautions to ensure accuracy of readings whilst considering infection-prevention and control.	A-4. Record an individual's vital signs after measuring them.
	Equipment to measure vital signs: digital thermometer or mercury free thermometer; digital blood pressure monitor; stop watch.		
	Precautions taking into consideration accuracy and infection-prevention and control: hand hygiene and cleansing of equipment; proper use of equipment; accuracy considerations when taking measurements; communication with patient to get relevant information regarding any risks.		
	<p>Measuring and recording the vital signs of an individual:</p> <ul style="list-style-type: none"> • Temperature <ul style="list-style-type: none"> ○ Positioning of thermometer; ○ Proper recording of result; • Pulse <ul style="list-style-type: none"> ○ Make sure the individual is seated and calm/rested; ○ Locate the radial pulse (place the second and third fingers NOT the thumb for it has a pulse of its own); ○ Count pulse for 60 seconds; ○ Proper recording of result; • Breathing rate <ul style="list-style-type: none"> ○ Ensure the individual is at rest and doesn't know their breathing rate is being taken; ○ Count how many times the chest rises and falls: 1 breath = 1 rise + 1 fall; ○ Note whether the breathing is regular or irregular; ○ Properly record the number of breaths a person takes per minute; • Blood Pressure <ul style="list-style-type: none"> ○ Ensure the individual is relaxed and not talking; ○ Make sure that the individual does not have restrictive clothing impairing the blood flow; ○ The arm is resting on the table, level with the heart and with palm upwards; ○ Connection from cuff to monitor should fall downwards along the arm in line with brachial artery ensuring it is properly positioned above inner elbow and neither tight nor loose; ○ Properly record the systolic and diastolic pressure. 		

Subject Focus	Health and Safety		
LO 8.	Demonstrate an understanding of potential hazards in Health and Social Care and how legislation promotes health, safety and security.		
K-15.	K-15. List different types of hazards that might be found in Health and Social Care environments.	K-15. Outline potential hazards in Health and Social Care environments and their associated risks.	K-15. Identify the safety measures to keep in mind when planning a specific room in a Health and Social Care environment.
	Hazards in Health and Social Care environments: e.g. slip-trip-fall hazards, hazardous agents, sanitary conditions and hygiene, ergonomic hazards, physical hazards, work conditions, untrained staff, work practices.		
K-16.	K-16. Match the types of signs used in a Health and Social Care environment with their colour.	K-16. Identify which safety equipment should be used to minimise or eliminate the risks.	K-16. Determine the right equipment and symbols that must be at hand to ensure safety in a particular scenario.
	Signs and symbols in a Health and Social Care environment: <ul style="list-style-type: none"> • Prohibition signs (red); • Warning signs (yellow); • Mandatory signs (blue); • Safe condition signs (green). Equipment to minimise or eliminate risks: e.g. bed rails, height adjustable bed, hoist, protective wear, antibacterial disinfectants, safe disposal boxes, safety installations in bathrooms such as rails.		
K-17.	K-17. Name Health and Safety legislation related to Health and Social Care.	K-17. State the aim of current Health and Safety legislation.	K-17. Outline how current Health and Safety legislation promotes Health and Safety practices.
	Legislation: e.g. <ul style="list-style-type: none"> • LN 35 of 2003: Protection against Risks of Back Injury at Work Placement Regulations, • LN 121 of 2003: Minimum Requirements for the use of Personal Protective Equipment at Work Regulations, • LN 199 of 2015: Work Place (Provision of Health and/or Safety Signs Amendment) Regulations, • LN 293 of 2016: Work Equipment (Minimum Safety and Health Requirement) Regulations. N.B. For assessment purposes candidates are not required to write the legislation number.		
C-8.	C-8. Match the different types of legislation with different Health and Social Care scenarios.	C-8. Identify the responsibilities of the employers and/or employees in a given scenario.	C-8. Discuss a responsibility of employers and employees to ensure Health and Safety.
	Responsibilities of the employer and the employee: <ul style="list-style-type: none"> • The employer is responsible for: the Health and Safety of the employees; the elimination and minimization of hazards and risks; the training of employees; the provision and maintenance of adequate equipment; ensuring there is a Health and Safety officer/s; • The employee is responsible for: his/her own and colleagues' safety; attending training provided by the employer; using equipment in an adequate manner; co-operating with employer; co-operating with Health and Safety officer/s; reporting any hazards and informing superior if an accident occurs. 		

Subject Focus	Activities of daily living		
LO 9.	Demonstrate an understanding of the activities of daily living and how their application improves quality of care.		
K-18.	K-18. List the activities of daily living.	K-18. Mention why assessing the activities of daily living is important.	K-18. Outline the support and/or equipment needed by an individual who has problems carrying out their daily living activities independently.
	Activities of daily living: e.g. Communicating, breathing, eating, drinking, eliminating waste, personal cleansing and dressing, mobilising, sleeping/resting, working, playing.		
	Importance of assessing the activities of daily living: e.g. assess the level of independence of the individual, identify areas where individual is not independent, identify specific type of help (whether human/mechanical) needed.		
	<ul style="list-style-type: none"> • Different people who give support: e.g. doctors, communication therapists, physiotherapists, occupational therapists, nurses, carers, relatives; • Different equipment: e.g. electronic devices, gadgets for cleansing, gadgets for dressing, sock aid, closing aids (zipper and button), mobilising equipment (frames, tripods, sticks, crutches, wheelchairs). 		
C-9.	C-9. Identify the potential health problems which people with mobility impairment are likely to experience.	C-9. Outline the causes of pressure sores and where they are likely to develop in a given case scenario.	C-9. Explain how pressure sores can be prevented in a given scenario.
	Potential health problems experienced by people with mobility impairment: e.g. obesity, muscle weakness, unsteadiness, pressure sores, pain, joint problems, infections.		
	<p>The cause of pressure sores development and where they are formed:</p> <ul style="list-style-type: none"> • Development of pressure sores: e.g. friction, compression; • Where they are formed: e.g. ears, head, shoulder blades, back bone, elbows, sacrum, buttocks, knees heels, ankles. 		
	Prevention of pressure sores: e.g. change position frequently (at least every 2 hours if bedridden and every 20 minutes if on a wheelchair), use of pressure relief mattress or cushions, use of Sudocrem®, remove any creased material beneath the patient, keep skin clean and dry, change nappy often, use pillows, exercise, diet rich in protein.		

A-5.	A-5. Use the appropriate technique in making an unoccupied bed.	A-5. Prepare the necessary equipment to wash, move and handle an individual with mobility problems after making sure that the environment is safe.	A-5. Wash the arms of an individual with mobility problems whilst using appropriate moving and handling techniques.
	Unoccupied bed making technique: clear the bed; put the fitted sheet on; put the top sheet on; make hospital corners.		
	<p>Preparation of equipment to wash, move and handle an individual with mobility problems:</p> <ul style="list-style-type: none"> • Create a safe environment: the weight of the individual, the capability of the individual, the behaviour of the individual; the working environment; • Wash hands*; • Prepare equipment: basin; soap and sponge; towels; apron; equipment for moving and handling. <p><i>*N.B. For assessment purposes, techniques to wash hands should be according to the WHO guidelines: http://www.who.int/qpsc/clean_hands_protection/en/</i></p>		
	<p>Washing, moving and handling individuals with mobility problems: wear protective equipment; show respect, dignity and privacy while meeting individual's needs; respect independence; involve individual as much as possible when moving and handling; use appropriate moving and handling technique; use appropriate washing technique; use appropriate technique to dry up the washed areas; use appropriate technique to dress the individual after washing.</p> <p><i>N.B. For assessment purposes, ONE of the following moving and handling techniques are to be considered: sitting transfer from bed to wheelchair using a transfer board; transfer of a patient who can take some weight on his legs and needs to be transferred from bed to chair; repositioning of patient on bed; repositioning of patient on wheelchair; walking with a Zimmer frame; help patient to stand from wheelchair using one person on one side.</i></p> <p><i>N.B. It is highly recommended that during delivery transfer of patient from bed to wheelchair using hoist is demonstrated.</i></p>		

Subject Focus	First Aid skills		
LO 10.	Demonstrate knowledge of basic First Aid skills.		
K-19.	K-19. Identify the different items that are necessary in a First Aid box.	K-19. Outline the function of each item in the First Aid box.	K-19. Describe why it is important to know how to use the items in the First Aid box.
	Necessary items in a First Aid box: ten individually wrapped sterile adhesive dressings in various sizes; sterile eye pads with attachment; three triangular bandages; six safety pins; three sterile dressings in various sizes; a suitable supply of sterile eye wash; three pairs of surgical gloves; three roller bandages of different sizes; one personal protection shield for use during artificial respiration; three individually wrapped gauze pads.		
	Reasons for knowing how to use First Aid box items: e.g. to be able to use the items for the correct purpose, to prevent and control infections, to prevent further harm.		
K-20.	K-20. Outline the importance of working in a team in an emergency situation.	K-20. State all the information needed when calling for help in an emergency situation.	K-20. Identify the situations which might require someone to summon help from a health care professional.
	Importance of working in a team in an emergency situation: e.g. synergy between team members, increased safety of service users, increased efficiency in reaching targets.		
	Information when calling for help: exact address of emergency or any noticeable landmarks; directions to the scene of emergency; telephone number from where call is taking place; details of incident such as number of people involved; description of injuries and any known pre-existing medical conditions.		
C-10.	Situations that might require someone to summon help from a health care professional: e.g. cardiac arrest, falls, fractures, bleeding, burns, choking, unconsciousness.		
	C-10. Identify the different roles that individuals should assume during an emergency situation.	C-10. Outline the procedure when treating a minor accident.	C-10. Describe the First Aid application/procedure needed in a major accident.
	Roles assumed by individuals when there is an emergency: someone to call 112; someone to help in assisting person in emergency situation; someone to help in moving away any vulnerable individuals; if more than one First Aider is present any CPR should be done alternately.		
A-6.	Procedure to treat minor accidents: 1 st degree burns or minor cuts or minor nose bleeds or minor sprains/strains.		
	First Aid application/procedure for major accidents: fractures or cardiac arrests or unconsciousness or choking.		
A-6.	A-6. Prepare a First Aid box against an inventory.	A-6. Demonstrate the First Aid procedure needed in a minor accident.	A-6. Demonstrate the First Aid Procedure needed in a major accident.
	Preparation of First Aid box: choose the correct items; correct quantity of each item.		

Learning Outcomes and Assessment Criteria

Subject Focus:	Organs and main body systems
Learning Outcome 6:	Demonstrate an understanding of the organisation of the human body and the interrelationship of major body systems.

Knowledge Criteria			Comprehension Criteria			Application Criteria		
Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)
K-11. Label the key organs of the human body.	K-11. Identify the position of the key organs in the human body.	K-11. Outline the key organs in the human body and their core function.						
			C-6. Name which systems interact with each other in the human body.	C-6. Describe how different systems interact with each other.	C-6. Explain how different systems interact with each other in a given scenario.			
K-12. List the main systems of the human body.	K-12. Name key organs within the main systems of the human body.	K-12. Outline the main systems in the human body with their main function.						

Subject Focus:	Vital signs
Learning Outcome 7:	Measure vital signs and interpret the results obtained.

Knowledge Criteria			Comprehension Criteria			Application Criteria		
Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)
K-13. Name the vital signs of the human body.	K-13. Determine the normal range of the vital signs of a particular individual.	K-13. Interpret the readings of the vital signs from nursing observation sheets.	C-7. List the most common physiological reasons why the readings of the vital signs might not be within the acceptable range.	C-7. Outline the importance of taking measurements of the vital signs.	C-7. Describe the most common physiological reasons why vital signs might not be within the acceptable range.	A-4. Choose the correct equipment to measure the vital signs by taking into consideration the individual's needs.	A-4. Take the necessary precautions to ensure accuracy of readings whilst considering infection-prevention and control.	A-4. Record an individual's vital signs after measuring them.
K-14. List a sign/symptom that might be present when readings of each vital sign are outside the acceptable range.	K-14. Outline a consideration that must be taken before measurements of each vital sign are taken.	K-14. Indicate the underlying factors that influence the reading of the vital signs.						

Subject Focus:	Health and Safety
Learning Outcome 8:	Demonstrate an understanding of potential hazards in Health and Social Care and how legislation promotes health, safety and security.

Knowledge Criteria			Comprehension Criteria			Application Criteria		
Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)
K-15. List different types of hazards that might be found in Health and Social Care environments.	K-15. Outline potential hazards in Health and Social Care environments and their associated risks.	K-15. Identify the safety measures to keep in mind when planning a specific room in a Health and Social Care environment.						
K-16. Match the types of signs used in a Health and Social Care environment with their colour.	K-16. Identify which safety equipment should be used to minimise or eliminate the risks.	K-16. Determine the right equipment and symbols that must be at hand to ensure safety in a particular scenario	C-8. Match the different types of legislation with different Health and Social Care scenarios.	C-8. Identify the responsibilities of the employers and/or employees in a given scenario.	C-8. Discuss a responsibility of employers and employees to ensure Health and Safety.			
K-17. Name Health and Safety legislation related to Health and Social Care.	K-17. State the aim of current Health and Safety legislation.	K-17. Outline how current Health and Safety legislation promotes Health and Safety practices.						

Subject Focus:	Activities of daily living
Learning Outcome 9:	Demonstrate an understanding of the activities of daily living and how their application improves quality of care.

Knowledge Criteria			Comprehension Criteria			Application Criteria		
Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)
K-18. List the activities of daily living.	K-18. Mention why assessing the activities of daily living is important.	K-18. Outline the support and/or equipment needed by an individual who has problems carrying out their daily living activities independently.	C-9. Identify the potential health problems which people with mobility impairment are likely to experience.	C-9. Outline the causes of pressure sores and where they are likely to develop in a given case scenario.	C-9. Explain how pressure sores can be prevented in a given scenario.	A-5. Use the appropriate technique in making an un-occupied bed.	A-5. Prepare the necessary equipment to wash, move and handle an individual with mobility problems after making sure that the environment is safe.	A-5. Wash the arms of an individual with mobility problems whilst using appropriate moving and handling techniques.

Subject Focus:	Basic First Aid skills
Learning Outcome 10:	Demonstrate knowledge of basic First Aid skills.

Knowledge Criteria			Comprehension Criteria			Application Criteria		
Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)
K-19. Identify the different items that are necessary in a First Aid box.	K-19. Outline the function of each item in the First Aid box.	K-19. Describe why it is important to know how to use the items in the First Aid box.	C-10. Identify the different roles that individuals should assume during an emergency situation.	C-10. Outline the procedure when treating a minor accident.	C-10. Describe the First Aid application/ procedure needed in a major accident.	A-6. Prepare a First Aid box against an inventory.	A-6. Demonstrate the First Aid procedure needed in a minor accident.	A-6. Demonstrate the First Aid procedure needed in a major accident.
K-20. Outline the importance of working in a team in an emergency situation.	K-20. State all the information needed when calling for help in an emergency situation.	K-20. Identify the situations which might require someone to summon help from a health care professional.						

Unit 3: Equality, Diversity and Quality Care

Unit Description

This unit aims to give candidates an understanding of diversity in Health and Social Care. Multi-cultural societies have different values, preferences and beliefs with the consequence that treatments and practices adopted by some groups may be unacceptable to others on the basis of diverse cultural norms and/or religious practices. Diet, physical contact, certain treatments (i.e. blood transfusions) and rituals can be regarded differently by individuals from diverse cultures. Sometimes, these might necessitate alternative treatments.

Diversity can create obstacles while caring for people. In the Health and Social Care fields it is important to be aware of these differences in order to adjust practice to accommodate individual needs wherever possible. Similarly, different people have different values and norms. It is extremely important that practitioners in the Health and Social Care field are as non-judgmental as possible and are able to demonstrate unconditional positive regard towards each individual service user.

Individuals accessing Health and Social Care services are vulnerable because they are dependent on others for their care. This means that practitioners' attitudes and prejudices may have an effect on the care being provided. This unit will explore prejudices and stereotypes and encourage candidates to examine their own values and beliefs. Awareness of how such (conscious or subconscious) prejudices may affect practitioners' behaviour will improve the quality of care they provide.

Learning Outcomes

At the end of the unit, I can:

- LO 11.** Demonstrate an understanding of the concept of diversity underpinning Health and Social Care.
- LO 12.** Demonstrate an understanding of the role of legislation and organisations in promoting anti-discriminatory practice and equality.
- LO 13.** Demonstrate an understanding of the rights of individuals accessing Health and Social Care services.
- LO 14.** Demonstrate an understanding of the social service principles and the provision of quality care.

Assessment Criteria and Content

Subject Focus	Diversity		
LO 11.	Demonstrate an understanding of the concept of diversity underpinning Health and Social Care.		
K-21.	K-21. List the benefits of a diverse society.	K-21. State the drawbacks of living in a diverse society.	K-21. Outline the factors that contribute to a diverse society.
	Benefits of a diverse society: e.g. development of a wider range of social skills through meeting different people, greater tolerance/acceptance, cultural enrichment, expanding range of foods, experience a variety of knowledge, skills, behaviours, beliefs that people will bring with them to the care setting.		
	Drawbacks of living in a diverse society: e.g. tensions, conflict, cultural clashes.		
	Factors that contribute to a diverse society: e.g. family structure, gender, social class, age, sexual orientation, religion, race, disability, mental health problems.		
K-22.	K-22. Outline the main forms of discrimination.	K-22. Match the main forms of discrimination with the corresponding scenario.	K-22. Identify the different types of discriminatory practices that individuals might face in a given scenario.
	Main forms of discrimination: direct; indirect.		
	N.B. It is highly recommended that positive discrimination should also be addressed during delivery.		
	Discriminatory practices: e.g. stereotyping, labelling, prejudice, bullying, avoidance, not considering individual needs, limiting access to services.		
C-11.	C-11. Name the potential consequences of discriminatory practices.	C-11. Outline potential consequences resulting from different discriminatory practices.	C-11. Explain the potential consequences of discriminatory practices by providing a case scenario.
	Potential consequences of discriminatory practices: e.g. anger/aggressiveness, physical and emotional injury, low self-esteem, guilt/shame, stress, poor mental health, restricted opportunities, deviant behaviour, loss of rights.		
	N.B. For Assessment purposes at Level 3, candidates should provide a case scenario themselves.		
A-7.	A-7. Prepare points that can be used in a discussion regarding a factor that might result in discrimination.	A-7. Present your views in a discussion regarding a factor that might result in discrimination.	A-7. Participate in a discussion about a factor that might result in discrimination.
	Preparation of points to be used in discussing a factor that might result in discrimination: THREE reasons in favour or against the motion.		
	Presentation of views: support your view by giving facts, examples, comparisons, etc. as evidence; explain how the evidence supports your reasons.		
	Participation in a discussion: rebut your opponent’s views; deliver points persuasively through effective verbal and non-verbal communication skills.		
	N.B. For assessment purposes, it is highly recommended to differentiate between candidates who rebut and use persuasive skills in the appropriate manner and those who present weaker arguments.		

Subject Focus	Legislation and organisations		
LO 12.	Demonstrate an understanding of the role of legislation and organisations in promoting anti-discriminatory practice and equality.		
K-23.	K-23. List barriers to accessing services.	K-23. Outline ways and means of facilitating access to services.	K-23. Describe how certain services enable individuals to raise their standard of living.
	Barriers to accessing services: physical; psychological; financial; cultural and linguistic.		
	Facilitating access to services: e.g. adaptation of existing premises, awareness campaigns, basic services, self-advocacy.		
	Services that enable individuals to raise their standard of living: free education; free healthcare services; free social services; social benefits.		
K-24.	K-24. Name an international declaration and convention that promotes anti-discriminatory practices.	K-24. Outline how current articles in the Constitution of Malta promote anti-discriminatory practices.	K-24. Describe how current articles in the Constitution of Malta promote anti-discriminatory practices in a given scenario.
	International declaration and convention promoting anti-discriminatory practices: Universal Declaration of Human Rights; United Nations Convention on the Rights of the Child.		
	Articles in the Constitution of Malta promoting anti-discriminatory practices: <ul style="list-style-type: none"> • Article 14: Equal rights of men and women; • Article 45: Protection from discrimination on the grounds of race, etc.; • Article 17: Social assistance and insurance; • Article 32: Fundamental rights and freedoms of the individual; • Article 40: Protection of freedom of conscience and worship. 		
K-25.	K-25. List service providers which offer support to individuals in Malta.	K-25. Identify the Health Care Services and/or Social Care services needed from the given scenario.	K-25. Outline an advantage and a disadvantage of different types of organisations providing support to vulnerable individuals.
	Service providers: e.g. Mater Dei Hospital, Mount Carmel Hospital, health centres, domiciliary care facilities, day care facilities, Aġenzija Appogg, Aġenzija Sedqa, Aġenzija Sapport, Caritas, residential homes.		
	Types of services offering support: <ul style="list-style-type: none"> • Health care services: e.g. medical, nursing, therapy (as needed). • Social care services: e.g. social work services, psychological services, community services. 		
	Types of organisations providing support to vulnerable individuals: governmental; non-governmental; private; public-private partnerships.		

C-12.	C-12. Identify the different practitioners that may be involved in providing care for service users in a particular scenario.	C-12. Outline the different roles of the care practitioners in a specific scenario.	C-12. Explain how a multidisciplinary team work together in order to meet the holistic needs of an individual in a specific scenario.
	Practitioners involved in providing care for service users: e.g. nurses, doctors, social workers, psychologists, psychiatrists, care workers, physiotherapists, communication therapists, occupational therapists.		
	How multidisciplinary teams work together: conducting assessment; sharing information and coordination; planning short-term and long-term goals; monitoring progress.		
A-8.	A-8. Prepare a list of questions to be used in an interview with a specific Health/Social Care practitioner.	A-8. Interview a Health/Social Care practitioner to understand his/her role.	A-8. Write a report of the interview with the Health/Social Care practitioner.
	Questions to be used in an interview with a Health & Social Care practitioner about: the profession itself and his/her role and responsibilities within the organisation (e.g. anti-discriminatory service, safe work practices, collaborative work); the legislation they need to take into consideration; the support services/organisations they need to work with.		
	Interview with a Health/Social Care practitioner: finding a suitable practitioner; setting up an appointment; conducting an interview.		
	Report summarising the main points of the interview in one's own words under four different categories: roles; responsibilities; legislation; support services.		

Subject Focus	Individual rights and care workers' responsibilities		
LO 13.	Demonstrate an understanding of the rights of individuals accessing Health and Social Care services.		
K-26.	K-26. Name the rights of individuals accessing Health and Social Care services.	K-26. Outline the importance for individuals to have their rights respected.	K-26. Describe which rights are in conflict with one another in a given scenario.
	Rights of individuals accessing Health and Social Care services: to be respected; to be granted equal opportunities; to be allowed privacy; to be safeguarded from danger and harm; to be allowed access to information; confidentiality.		
	Rights of individuals which can conflict with one another: <ul style="list-style-type: none"> the right of choice vs the right to be safeguarded from danger and harm or the right to privacy vs the right to be safeguarded from danger and harm or promoting the individual's independence vs the right to be safeguarded from danger or harm or meeting the needs of the individual vs taking account of their choices or the rights of the individual service user vs the rights of others. 		

Subject Focus	Values and quality care		
LO 14.	Demonstrate an understanding of the social service principles and the provision of quality care.		
K-27.	K-27. List values which are important for Health and Social Care professionals.	K-27. Outline how values help to give a good service to vulnerable individuals.	K-27. Describe the impact of values in a given scenario.
	Values: e.g. fairness, compassion, generosity, commitment, courage, courtesy, honesty, self-control.		
K-28.	K-28. List the principles that guide Health and Social Care workers.	K-28. Outline the principles that guide Health and Social Care workers.	K-28. Discuss negative impacts of not following Health and Social Care principles.
	<p>Principles:</p> <ul style="list-style-type: none"> • Protect the rights of service users and their relatives/carers. • Promote the interests of service users and their relatives/carers. • Establish and maintain the trust and confidence of service users and their relatives/carers. • Promote the independence of service users while protecting them from harm. • Take appropriate risks that are necessary for the service users' self-development and wellbeing. • Be accountable for the quality of your work. <p>Negative impacts: e.g. individual needs of service users are not met, discriminatory practice, rights of individuals are not upheld, individuals might be at risk of harm.</p>		
K-29.	K-29. List the qualities Health and Social Care workers need to possess in order to provide quality care.	K-29. Outline how these qualities enable Health and Social Care workers to provide quality care.	K-29. Describe the qualities that are essential for a care worker in a particular scenario.
	<p>Qualities of Social Care workers: e.g. care, compassion, competence, communication, courage, commitment.</p> <p>N.B. Quality care means that one is adhering to the code of practice for social service workers.</p>		
A-9.	A-9. Participate in a role play to show good mannerisms in quality care.	A-9. Participate in a role play to show the qualities that Health and Social Care workers should possess.	A-9. Participate in a role play to promote the rights of the individuals accessing Health and Social Care services.
	<p>N.B. For assessment purposes, in a role-play a candidate acts out an imaginary scenario that closely mirrors a situation that could occur in a care setting. The role play should involve interacting with 'an actor' posing as a patient/service-user. Candidates should not write and/or be given a transcript.</p> <p>N.B. At the end of the activity the candidate should indicate and explain THREE good mannerisms, THREE qualities and TWO rights that were used.</p>		

Learning Outcomes and Assessment Criteria

Subject Focus:	Diversity
Learning Outcome 11:	Demonstrate an understanding of the concept of diversity underpinning Health and Social Care.

Knowledge Criteria			Comprehension Criteria			Application Criteria		
Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)
K-21. List the benefits of a diverse society.	K-21. State the drawbacks of living in a diverse society.	K-21. Outline the factors that contribute to a diverse society.	C-11. Name the potential consequences of discriminatory practices.	C-11. Outline potential consequences resulting from different discriminatory practices.	C-11. Explain the potential consequences of discriminatory practices by providing a case scenario.	A-7. Prepare points that can be used in a discussion regarding a factor that might result in discrimination.	A-7. Present your views in a discussion regarding a factor that might result in discrimination.	A-7. Participate in a discussion about a factor that might result in discrimination.
K-22. Outline the main forms of discrimination.	K-22. Match the main forms of discrimination with the corresponding scenario.	K-22. Identify the different types of discriminatory practices that individuals might face in a given scenario.						

Subject Focus:	Legislation and organisations
Learning Outcome 12:	Demonstrate an understanding of the role of legislation and organisations in promoting anti-discriminatory practice and equality.

Knowledge Criteria			Comprehension Criteria			Application Criteria		
Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)
K-23. List barriers to accessing services.	K-23. Outline ways and means of facilitating access to services.	K-23. Describe how certain services enable individuals to raise their standard of living.	C-12. Identify the different practitioners that may be involved in providing care for service users in a particular scenario.	C-12. Outline the different roles of the care practitioners in a specific scenario.	C-12. Explain how a multidisciplinary team work together in order to meet the holistic needs of an individual in a specific scenario.	A-8. Prepare a list of questions to be used in an interview with a specific Health/Social Care practitioner.	A-8. Interview a Health/Social Care practitioner to understand his/her role.	A-8. Write a report of the interview with the Health/Social Care practitioner.
K-24. Name an international declaration and convention that promotes anti-discriminatory practices.	K-24. Outline how current articles in the Constitution of Malta promote anti-discriminatory practices.	K-24. Describe how current articles in the Constitution of Malta promote anti-discriminatory practices in a given scenario.						
K-25. List service providers which offer support to individuals in Malta.	K-25. Identify the Health Care Services and/or Social Care services needed from the given scenario.	K-25. Outline an advantage and a disadvantage of different types of organisations providing support to vulnerable individuals.						

Subject Focus:	Individual rights and care workers' responsibilities
Learning Outcome 13:	Demonstrate an understanding of the rights of individuals accessing Health and Social Care services.

Knowledge Criteria			Comprehension Criteria			Application Criteria		
Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)
K-26. Name the rights of individuals accessing Health and Social Care services.	K-26. Outline the importance for individuals to have their rights respected.	K-26. Describe which rights are in conflict with one another in a given scenario.						

Subject Focus:	Values and quality care
Learning Outcome 14:	Demonstrate an understanding of the social service principles and the provision of quality care.

Knowledge Criteria			Comprehension Criteria			Application Criteria		
Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)	Assessment Criteria (Level 1)	Assessment Criteria (Level 2)	Assessment Criteria (Level 3)
K-27. List values which are important for Health and Social Care professionals.	K-27. Outline how values help to give a good service to vulnerable individuals.	K-27. Describe the impact of values in a given scenario.						
K-28. List the principles that guide Health and Social Care workers.	K-28. Outline the principles that guide Health and Social Care workers.	K-28. Discuss negative impacts of not following Health and Social Care principles.				A-9. Participate in a role play to show good mannerisms in quality care.	A-9. Participate in a role play to show the qualities that Health and Social Care workers should possess.	A-9. Participate in a role play to promote the rights of the individuals accessing Health and Social Care services.
K-29. List the qualities Health and Social Care workers need to possess in order to provide quality care.	K-29. Outline how these qualities enable Health and Social Care workers to provide quality care.	K-29. Describe the qualities that are essential for a care worker in a particular scenario.						

Appendix 1 – Minimum Required Resources

This list is not intended to be exhaustive. These resources should be available for at least 16 candidates.

Common

1. Clinical Observation Equipment

- A variety of thermometers (mercury free, digital, temporal, ear thermometer)
- Stopwatches
- Electronic sphygmomanometers

2. Moving and Handling Equipment

- Wheelchair
- Propad cushion
- Non-slip mat
- Hoist and sling
- Hospital bed and mattress
- Adjustable bed table
- Walking frame
- Transfer board
- Sliding sheet
- Pillows
- Pivot disk
- Transfer belt

3. Washing

- Curtains and curtain rails
- Linen (bed sheets, pillow cases)
- Incontinence pads
- Towels
- Basin
- Soap

4. Baby Care

- Baby care model
- Nappy changer
- Nappies
- Wipes
- Sudocrem®

5. Health and Safety Equipment

- Hand washing training kit (UV Hand Inspection Cabinet + Glow lotion)
- Sharp container
- Disposable gloves
- Disposable aprons
- First Aid Kit
- Pill preparation box
- Resusci Anne® training mannequin
- Choking rescue training vest

6. Feeding Equipment – Persons with physical Impairment

- Adjustable bed table
- Nelson knife
- Right and left Manoy cutlery set
- Weighted cutlery set
- Two-handled transparent mug with spout
- Scoop plate
- Plate guard

Appendix 2 – Portfolio Marking Schemes

PART 1 – BASED ON ANY TWO APPLICATION CRITERIA FROM UNIT 1				Criterion 1 Marks	Criterion 2 Marks	Total Marks
Overview of Application Process	1 – 3 marks	4 – 6 marks	7 – 10 marks			
	Steps required as part of the overall process to complete the whole criterion are provided – without any details or elaboration – but most are missing, incorrect, or not necessarily in logical order.	The main steps required as part of the overall process to complete the whole criterion are provided – including some detail or elaboration – but some are missing, incorrect, or not necessarily in logical order.	Most of, or all, the main steps required as part of the overall process to complete the whole criterion are correctly provided – including necessary details or elaboration – and in a logical order.	/10	/10	/20
Supporting Evidence	1 – 2 marks	3 – 4 marks	5 – 7 marks	/7	/7	/14
	The submitted photo evidence only shows the final work or artifact. Linking to supporting evidence does not exist or is inconsistent.	The submitted photo evidence shows some steps and the final work or artifact. Linking to supporting evidence is overall consistent.	The submitted photo evidence shows most of, or all, the main steps and the final work or artifact, using proper captions. Linking to supporting evidence is consistent throughout.			
Overview of Skills	1 – 3 marks	4 – 6 marks	7 – 10 marks	/10	/10	/20
	Underlying skills employed to complete the criterion are provided – without any details or elaboration – but most are missing or incorrect.	The main underlying skills employed to complete the criterion are provided – including some details or elaboration – but some are missing or incorrect.	Most of, or all, the main underlying skills employed to complete the criterion are correctly provided – including necessary details or elaboration.			
Presentation	1 mark	2 – 3 marks	4 – 6 marks			/6
	The material submitted for this part of the Portfolio generally follows the template, but the overall presentation is poor and/or inconsistent.	The material submitted for this part of the Portfolio follows the template, and the overall presentation is good and consistent.	The material submitted for this part of the Portfolio follows the template, and the presentation is excellent and consistent throughout. A proper Table of Contents is also included.			
TOTAL PART 1 MARK						/60

PART 2 – BASED ON ANY TWO APPLICATION CRITERIA FROM UNIT 2				Criterion 1 Marks	Criterion 2 Marks	Total Marks
Overview of Application Process	1 – 3 marks	4 – 6 marks	7 – 10 marks	/10	/10	/20
	Steps required as part of the overall process to complete the whole criterion are provided – without any details or elaboration – but most are missing, incorrect, or not necessarily in logical order.	The main steps required as part of the overall process to complete the whole criterion are provided – including some detail or elaboration – but some are missing, incorrect, or not necessarily in logical order.	Most of, or all, the main steps required as part of the overall process to complete the whole criterion are correctly provided – including necessary details or elaboration – and in a logical order.			
Supporting Evidence	1 – 2 marks	3 – 4 marks	5 – 7 marks	/7	/7	/14
	The submitted photo evidence only shows the final work or artifact. Linking to supporting evidence does not exist or is inconsistent.	The submitted photo evidence shows some steps and the final work or artifact. Linking to supporting evidence is overall consistent.	The submitted photo evidence shows most of, or all, the main steps and the final work or artifact, using proper captions. Linking to supporting evidence is consistent throughout.			
Overview of Skills	1 – 3 marks	4 – 6 marks	7 – 10 marks	/10	/10	/20
	Underlying skills employed to complete the criterion are provided – without any details or elaboration – but most are missing or incorrect.	The main underlying skills employed to complete the criterion are provided – including some details or elaboration – but some are missing or incorrect.	Most of, or all, the main underlying skills employed to complete the criterion are correctly provided – including necessary details or elaboration.			
Presentation	1 mark	2 – 3 marks	4 – 6 marks			/6
	The material submitted for this part of the Portfolio generally follows the template, but the overall presentation is poor and/or inconsistent.	The material submitted for this part of the Portfolio follows the template, and the overall presentation is good and consistent.	The material submitted for this part of the Portfolio follows the template, and the presentation is excellent and consistent throughout. A proper Table of Contents is also included.			
TOTAL PART 2 MARK						/60

PART 3 – BASED ON ONE UNIT 3 APPLICATION CRITERION AND SELF-EVALUATION					Total Marks
Overview of Application Process		1 – 3 marks Steps required as part of the overall process to complete the whole criterion are provided – without any details or elaboration – but most are missing, incorrect, or not necessarily in logical order.	4 – 6 marks The main steps required as part of the overall process to complete the whole criterion are provided – including some detail or elaboration – but some are missing, incorrect, or not necessarily in logical order.	7 – 10 marks Most of, or all, the main steps required as part of the overall process to complete the whole criterion are correctly provided – including necessary details or elaboration – and in a logical order.	/10
	Supporting Evidence		1 – 2 marks The submitted photo evidence only shows the final work or artifact. Linking to supporting evidence does not exist or is inconsistent.	3 – 4 marks The submitted photo evidence shows some steps and the final work or artifact. Linking to supporting evidence is overall consistent.	
Overview of Skills			1 – 3 marks Underlying skills employed to complete the criterion are provided – without any details or elaboration – but most are missing or incorrect.	4 – 6 marks The main underlying skills employed to complete the criterion are provided – including some details or elaboration – but some are missing or incorrect.	7 – 10 marks Most of, or all, the main underlying skills employed to complete the criterion are correctly provided – including necessary details or elaboration.
	Self-Evaluation		1 – 8 marks One soft and one technical skill gained throughout the subject are evaluated in relation to personal growth or future employment in industry. The arguments linking the skills gained with their contribution towards personal growth or future employment are generic or weak.	9 – 16 marks Various soft and technical skills gained throughout the subject are evaluated in relation to personal growth and future employment in industry. The arguments linking the skills gained with their contribution towards personal growth and future employment are valid, but some are not properly developed.	17 – 27 marks Various soft and technical skills gained throughout the subject are evaluated in relation to personal growth and future employment in industry. Most of, or all the arguments linking the skills gained with their contribution towards personal growth and future employment are properly developed.
Presentation			1 mark The material submitted for this part of the Portfolio generally follows the template, but the overall presentation is poor and/or inconsistent.	2 – 3 marks The material submitted for this part of the Portfolio follows the template, and the overall presentation is good and consistent.	4 – 6 marks The material submitted for this part of the Portfolio follows the template, and the presentation is excellent and consistent throughout. A proper Table of Contents is also included.
	TOTAL PART 3 MARK				