



ASSISTANT PRACTITIONER (HEALTH)

Key information

- ✓ Proposal approved
- ✓ Occupational standard approved
- ✓ End-point assessment plan approved

Reference: ST0215

Level: 5

Typical duration to gateway: 24 months

Typical EPA period: 3 months

Maximum funding: £14000

Route: Health and science

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End-point assessment plan

AP02

Introduction and overview

This document explains the requirements for end-point assessment (EPA) for the assistant practitioner (health) apprentices. End-point assessment organisations (EPAOs) must follow this when designing and delivering their EPA.

Assistant practitioner (health) apprentices, their employers and training providers should read this document.

An approved EPAO must conduct the EPA for this apprenticeship. Employers must select an approved EPAO from the Education and Skills Funding Agency's Register of end-point assessment organisations (RoEPAO).

A full-time apprentice typically spends 24 months on-programme (this means in training before the gateway) working towards competence as an assistant practitioner (health). All apprentices must spend at least 12 months on-programme. All apprentices must spend at least 20% of their on-programme time completing off-the-job training.

This EPA has 2 EPA methods.

The grades available for each EPA method are:

EPA method 1 - observation of practice:

- fail
- pass

EPA method 2 - professional discussion underpinned by a portfolio of evidence:

- fail
- pass
- distinction

The result from each EPA method is combined to decide the overall apprenticeship grade. The following grades are available for the apprenticeship:

- fail
- pass
- distinction

EPA summary table

<p>On-programme (typically 24 months)</p>	<p>Training to develop the knowledge, skills and behaviours (KSBs) of the occupational standard.</p> <p>Training towards English and mathematics qualifications at Level 2¹, if required.</p> <p>Training towards any other qualifications listed in the occupational standard.</p> <p>The qualification(s) required are:</p> <p>Foundation Degree Assistant Practitioner (a specialism may be indicated eg mental health, imaging, physiotherapy, rehabilitation, primary care, nursing, etc eg FdSc Assistant Practitioner)</p> <p>Compiling a portfolio of evidence.</p>
<p>End-point assessment gateway</p>	<p>The employer must be content that the apprentice is working at or above the level of the occupational standard.</p> <p>The apprentice's employer must confirm that they think the apprentice:</p> <ul style="list-style-type: none"> • is working at or above the occupational standard as an assistant practitioner (health) • has the evidence required to pass the gateway and is ready to take the EPA <p>An apprentice must have achieved 200 credits of the Foundation Degree Assistant Practitioner. The final 40 credits are assigned to the EPA.</p> <p>The qualification(s) required are:</p> <p>Foundation Degree Assistant Practitioner (a specialism may be indicated eg mental health, imaging, physiotherapy, rehabilitation, primary care, nursing, etc eg FdSc Assistant Practitioner)</p> <p>Apprentices must have achieved English and mathematics at Level 2¹.</p> <p>An apprentice must submit all gateway evidence to the EPAO. The EPAO must review the evidence. When the EPAO confirms the gateway requirements have been met, the EPA period starts and</p>

	<p>typically takes 3 months to complete. The expectation is that the EPAO will confirm the gateway requirements have been met.</p> <p>For the professional discussion underpinned by a portfolio of evidence, the apprentice will be required to submit a portfolio of evidence.</p> <p>Apprentices must submit any policies and procedures as requested by the EPAO.</p>
<p>End-point assessment (typically 3 months)</p>	<p>Grades available for each method:</p> <p>Observation of practice</p> <ul style="list-style-type: none"> • fail • pass <p>Professional discussion underpinned by a portfolio of evidence</p> <ul style="list-style-type: none"> • fail • pass • distinction <p>Overall EPA and apprenticeship can be graded:</p> <ul style="list-style-type: none"> • fail • pass • distinction
<p>Re-sits and re-takes</p>	<ul style="list-style-type: none"> • Re-take and re-sit grade cap: pass • Re-sit timeframe: typically 3 month(s) • Re-take timeframe: typically 6 month(s)

¹For those with an education, health and care plan or a legacy statement, the apprenticeship's English and mathematics minimum requirement is Entry Level 3. British Sign Language (BSL) qualifications are an alternative to English qualifications for those who have BSL as their primary language.

Length of end-point assessment period

The EPA will be taken within the EPA period. The EPA period begins when the EPAO confirms the gateway requirements are met and is typically 3 months.

The expectation is that the EPAO will confirm the gateway requirements are met and the EPA begins as quickly as possible.

EPA gateway

The apprentice's employer must confirm that they think the apprentice is working at or above the occupational standard as a assistant practitioner (health). They will then enter the gateway. The employer may take advice from the apprentice's training provider(s), but the employer must make the decision.

Apprentices must meet the following gateway requirements before starting their EPA.

These are:

- achieved English and mathematics at Level 2.
- Foundation Degree Assistant Practitioner (a specialism may be indicated eg mental health, imaging, physiotherapy, rehabilitation, primary care, nursing, etc eg FdSc Assistant Practitioner)
- achieved 200 credits of the Foundation Degree Assistant Practitioner. The final 40 credits are assigned to the EPA
- for the professional discussion underpinned by a portfolio of evidence apprentices must submit:
portfolio of evidence
- Apprentices must compile a portfolio of evidence during the on-programme period of the apprenticeship
- It must contain evidence related to the KSBs that will be assessed by the professional discussion
- The portfolio of evidence will typically contain 14 discrete pieces of evidence (2 per grading theme)
- Evidence may be used to demonstrate more than one KSB; a qualitative as opposed to quantitative approach is suggested. Evidence sources should be work-based and may include:
 1. Expert witness testimonials
 2. Written report of a case-based discussion
 3. Written report of supporting an intervention
 4. Teaching or advice and guidance resource developed by the apprentice
 5. Clinical supervision reflection (relating to K21 and S21)
 6. Work-based observation
 7. Evidence of ongoing professional development

8. Mapping document showing how the evidence provided meets the KSBs

- This is not a definitive list; other evidence sources are possible. Given the breadth of context and roles in which this occupation works, the apprentice will select the most appropriate evidence based on the context of their practice against the KSBs mapped to this method.
- The portfolio should not include reflective accounts or any methods of self-assessment except where evidencing K21 or S21
- Any employer contributions should focus on direct observation of performance (for example witness statements) rather than opinions
- The evidence provided must be valid and attributable to the apprentice; the portfolio of evidence must contain a statement from the employer and apprentice confirming this
- The portfolio of evidence must be submitted to the EPAO at the gateway

Apprentices must submit any policies and procedures as requested by the EPAO.

The EPA period starts when the EPAO confirms all gateway requirements have been met. The expectation is they will do this as quickly as possible.

Assessment methods

The assessment methods can be delivered in any order.

The result of one assessment method does not need to be known before starting the next.

Observation of practice

Overview

In an observation with questions, an independent assessor observes an apprentice in their workplace. The apprentice completes their day-to-day duties under normal working conditions. This allows the apprentice to demonstrate the KSBs shown in the mapping through naturally occurring evidence. The independent assessor asks questions as explained below. Simulation is not permitted during the observation.

The observation and responses to questions must be assessed holistically by the independent assessor when they are deciding the grade for the observation of practice.

Rationale

- This is a practical role, best demonstrated through completing activities in a real work setting
- Observation makes use of employer resources and equipment, which will be familiar to the apprentice and thus allow them to perform at their best
- Questioning allows for the assessment of the breadth and depth of underpinning knowledge against the grading descriptors
- Tasks completed during the observation should contribute to workplace productivity and are valid

- It is a holistic assessment method.

Delivery

The observation of practice must be structured to give the apprentice the opportunity to demonstrate the KSBs mapped to this EPA method to the highest available grade.

The independent assessor must only observe one apprentice to ensure quality and rigour and they must be as unobtrusive as possible.

The EPAO must give an apprentice 2 weeks notice of the observation.

The observation must take 2 hours and 15 minutes

Component 1: live observation 90 minutes

Component 2: question and answer session 45 minutes

The independent assessor can increase the time of the observation by up to 10%. This time is to allow the apprentice to complete a task or respond to a question if necessary. The observation and questioning must allow the apprentice the opportunity to demonstrate the KSBs at the highest possible grade.

The observation may be split into discrete sections held on the same working day.

EPAOs must manage invigilation of apprentices at all times to maintain security of the EPA, in line with their malpractice policy. This includes breaks and moving between locations.

The independent assessor must explain to the apprentice the format and timescales of the observation before it begins. This does not count towards the assessment time.

The independent assessor should observe the following during the observation:

- Working as part of the healthcare team to assess and provide care to individuals
- Communicating in a way that facilitates understanding
- Maintaining the health and safety of the workplace, individuals, colleagues and themselves through safe work practices
- Adhering to protocols relevant to their role, the service or intervention they are providing and the organisation they are working in

These activities provide the apprentice with the opportunity to demonstrate the KSBs as shown in the mapping.

Questions must be asked after the observation. The total duration of the observation assessment method is 2 hours and 15 minutes and the time for questioning is included in the overall assessment time is 45 minutes. The total time for the observation element is 90 minutes. The independent assessor must ask at least 5 questions. Follow-up questions are allowed. The independent assessor

must use the questions from the EPAO's question bank or create their own questions in-line with the EPAO's training.

The independent assessor must ask questions about KSBs that were not observed to gather assessment evidence. These questions are in addition to the set number of questions for the observation. The independent assessor can also ask questions to clarify answers given by the apprentice.

The independent assessor can increase the time of the observation by up to 10%. This time is to allow the apprentice to respond to a question if necessary. The observation and questioning must allow the apprentice the opportunity to demonstrate the KSBs at the highest possible grade.

The independent assessor conducts and assesses the observation of practice. They must record the KSBs observed, KSBs demonstrated in answers to questions and the grade achieved. The apprentice's answers to questions must also be recorded.

The independent assessor makes all grading decisions.

Assessment location

The observation of practice must take place in the apprentice's normal place of work (for example their employer's premises or a customer's premises). Equipment and resources needed for the observation must be provided by the employer and be in good working condition.

Questioning that occurs after the observation should take place in a quiet room, free from distractions and influence.

Question and resource development

EPAOs must write an assessment specification and question bank. The specification must be relevant to the occupation and demonstrate how to assess the KSBs shown in the mapping. It is recommended this is done in consultation with employers of this occupation. EPAOs should maintain the security and confidentiality of EPA materials when consulting employers. The questions must be unpredictable. A question bank of sufficient size will support this. The assessment specification and questions must be reviewed at least once a year to ensure they remain fit-for-purpose.

EPAOs will develop purpose-built question banks and ensure that appropriate quality assurance procedures are in place, for example, considering standardisation, training and moderation. EPAOs will ensure that questions are refined and developed to a high standard.

EPAOs must ensure that apprentices have a different set of questions in the case of re-sits or re-takes.

EPAOs must produce the following materials to support the observation of practice:

Independent assessor assessment materials which include:

- training materials
- administration materials

- moderation and standardisation materials
- guidance materials
- grading guidance
- question bank
- EPA guidance for the apprentice and employer

Professional discussion underpinned by a portfolio of evidence

Overview

In the professional discussion, an independent assessor and apprentice have a formal two-way conversation. It gives the apprentice the opportunity to demonstrate their competency across the KSBs as shown in the mapping.

Rationale

- it allows assessment of responses where there are a range of potential answers that cannot be tested through the observation
- it allows for assessment of knowledge, skills and behaviours that do not occur on a predictable or regular basis
- it can be conducted remotely, potentially reducing cost
- a professional discussion is a well-recognised method of checking knowledge, skills and behaviours and is widely used within the health sector

Delivery

The professional discussion must be structured to give the apprentice the opportunity to demonstrate the KSBs mapped to this EPA method to the highest available grade.

assess the depth of the apprentice's understanding of the KSBs.

The EPAO must give an apprentice 2 weeks notice of the professional discussion. The independent assessor must have at least 2 week(s) to review the supporting documentation.

Apprentices must have access to their portfolio of evidence during the professional discussion.

Apprentices can refer to and illustrate their answers with evidence from their portfolio of evidence, however the portfolio of evidence is not directly assessed.

The professional discussion must last for 90 minutes. The independent assessor can increase the time of the professional discussion by up to 10%. This time is to allow the apprentice to respond to a question if necessary.

For the professional discussion, the independent assessor must ask at least 7 questions. Follow-up questions are allowed. The independent assessor must use the questions from the EPAO's question bank or create their own questions in-line with the EPAO's training. The professional discussion must

allow the apprentice the opportunity to demonstrate the KSBs mapped to this EPA method at the highest possible grade.

The independent assessor conducts and assesses the professional discussion.

The independent assessor must keep accurate records of the assessment. The records must include the KSBs met, the grade achieved and answers to questions.

The independent assessor will make all grading decisions.

Assessment location

The professional discussion must take place in a suitable venue selected by the EPAO (for example the EPAO's or employer's premises).

The professional discussion can be conducted by video conferencing. The EPAO must have processes in place to verify the identity of the apprentice and ensure the apprentice is not being aided.

The professional discussion should take place in a quiet room, free from distractions and influence.

Question and resource development

EPAOs must write an assessment specification and question bank. The specification must be relevant to the occupation and demonstrate how to assess the KSBs shown in the mapping. It is recommended this is done in consultation with employers of this occupation. EPAOs should maintain the security and confidentiality of EPA materials when consulting employers. The questions must be unpredictable. A question bank of sufficient size will support this. The assessment specification and questions must be reviewed at least once a year to ensure they remain fit-for-purpose.

EPAOs will develop purpose-built question banks and ensure that appropriate quality assurance procedures are in place, for example, considering standardisation, training and moderation. EPAOs will ensure that questions are refined and developed to a high standard.

EPAOs must ensure that apprentices have a different set of questions in the case of re-sits or re-takes.

EPAOs must produce the following materials to support the professional discussion underpinned by a portfolio of evidence:

- independent assessor assessment materials which include:
 - training materials
 - administration materials
 - moderation and standardisation materials
 - guidance materials
 - grading guidance
 - question bank

- EPA guidance for the apprentice and employer

Grading

Observation of practice

Fail - does not meet pass criteria

THEME KSBS	PASS APPRENTICES MUST DEMONSTRATE ALL THE PASS DESCRIPTORS
Working to protocol K1 K2 K3 K4 S1 S2 S3 S4 B1 B3	<p>Adheres to the protocols, legislations, policies, standards and codes of conduct that apply to the role of an assistant practitioner in their everyday work (S1, K1)</p> <p>Works within the limits of their scope of practice and competence when carrying out their everyday work, being reliable, consistent and adaptable and recognising when and who to ask for support (K2, S2, B3)</p> <p>Works in partnership with others to provide and promote equitable, non-discriminatory, person-centred, safe care and support to an individual, seeking consent and encouraging the individual's active participation and choice (K3, S3)</p> <p>Applies the principles of a duty of care, safeguarding and protection to promote and maintain the best interest of an individual, recognising the signs of harm and abuse, and how they do this when they are working with or linking to other agencies and organisations (K4, S4)</p>
Assessment of individuals K5 K6 K7 S5 S6 S7	<p>Assesses an individual's physical and mental healthcare and wellbeing status using the correct equipment and tools relevant to the individual's needs, recognising and acting upon any changes or signs that the individual may be experiencing pain, distress or discomfort and considering the factors that may influence and impact on the assessment (K6, K7, S6, S7)</p> <p>Uses the correct equipment, tools and techniques to undertake and monitor physiological, technical or psychological measurements for an individual, recognising when these measurements vary from the normal range, working within their own scope of practice (K5, S5)</p>
Provision of care K8 K9 K10 K34 K35 K36 S8 S9 S10 S29	<p>Support individuals, making changes or recommendations to a care plan based on their assessment results and overall health and wellbeing, requirements for food and nutrition including nutrition and fluid balance, recognising changes and escalating, intervening or taking the correct action as required by the individual's symptoms, circumstances and care plan (K8, K9, S8, S9)</p> <p>Adheres to delegation protocols when undertaking an evidence-based intervention for an individual, working to standard operating procedures, treating the person with dignity and selecting the correct tools and equipment for the intervention (B1, K10, S10)</p>

	Provides care to an individual that demonstrates an understanding of the structure and function of the human body systems and their relationship to each other, the principles and philosophies of healthcare and the stages and processes of human development relevant to the individual and the context of the care being provided (K34, K35, K36)
Information governance K12 K13 S12 S13	Adheres to legal and local requirements for recording, storing, reporting, disclosing and sharing information and data, including using technology safely, maintaining confidentiality and respecting a duty of confidence (K12, K13, S12, S13)
Health and safety K29 K30 S30	<p>Promotes and monitors a safe and healthy environment for themselves and others by using the correct infection prevention and control for the task and complying with the correct policy and procedures including explaining how to handle hazardous materials and substances safely (K29, S29)</p> <p>Moves and assists an individual, equipment or another item safely and in line with policy and procedure (S30, K30)</p>

Professional discussion underpinned by a portfolio of evidence

Fail - does not meet pass criteria

THEME KSBS	PASS APPRENTICES MUST DEMONSTRATE ALL THE PASS DESCRIPTORS	DISTINCTION APPRENTICES MUST DEMONSTRATE ALL THE PASS DESCRIPTORS AND ALL OF THE DISTINCTION DESCRIPTORS
Provision of care K11 K18 S11 S18	<p>Discusses how changes in the health and wellbeing of an individual are monitored and reviewed, explaining the impact that a clinical, diagnostic or therapeutic intervention had upon a condition and how the signs that an individual's health and wellbeing may change as a result of the intervention (K11, S11)</p> <p>Explains mental capacity and the differences between mental illness, dementia and learning disability and the impact of these conditions using examples from their own experience to describe an instance when they recognised and responded to limitations in mental capacity adapting their intervention accordingly (K18, S18)</p>	<p>Critically evaluates at least two different clinical, diagnostic or therapeutic interventions describing the benefits of one over another and giving evidence-based examples of the impact on the individual and their condition (K11, S11)</p>
Communication K16 K17 S16 S17 B2	<p>Explains the different methods of communication used in the workplace, giving real-life examples of techniques they have used to communicate with and about individuals and those they work with, showing respect and empathy, analysing how they have overcome barriers and challenges, and reviewing how their communication has facilitated understanding (K16, S16 B2)</p> <p>Explains the use and benefits of digital solutions for improving</p>	<p>Critically evaluates the forms of communication used in the workplace, including digital systems, giving examples of their own real-life experiences and comparing and contrasting their own approach in different circumstances and assessing the outcome for individuals (K16, K17, S16, S17)</p>

	communication systems and practices (K17, S17)	
Teamwork, role modelling and leadership K14 K15 K22 S14 S15 S22	<p>Justify when and why they have delegated work to others in the multi-disciplinary team, acting in line with and engaging with the delegation, accountability and supervision protocols in the workplace (K14, S14)</p> <p>Analyse the structural and strategic environment in which health and social care services operate, explaining who they liaise with within the multi-disciplinary team and how they work together to prioritise and manage workloads (K15, S15)</p> <p>Compare and contrast leadership styles and principles in the workplace, giving examples of how leadership and management impacts on their own role and summarising instances when they have acted as a role-model to others (K22, S22)</p>	Critically evaluates their own leadership style and critiques examples of leadership, management and supervision they have experienced, including how the different styles have impacted on themselves and others (K22, S22)
CPD and reflection K19 K20 K21 S19 S20 S21	<p>Explain how they have actively taken part in training and development, reviewing how it has impacted on their own practice, and describing how they identify and evaluate their own learning needs and noting how these have been addressed (K19, S19)</p> <p>Evaluates their own role in appraisal explaining when they have sought and responded to feedback and how this has impacted on the creation of</p>	Reflect on evaluates their own experiences of becoming a reflective practitioner analysing and predicting their future requirements for ongoing CPD (K21, S21)

	<p>their personal development plan and ongoing learning journey (K20, S20)</p> <p>Describes how reflection can be used to improve practice and explains how they have used reflective models and adapted the way they work and the impact this has had on their own work (K21, S21)</p>	
<p>Empowering and educating K23 K24 K25 K26 S23 S24 S25 S26</p>	<p>Evaluates how they have identified the learning needs and styles of others, the strategies, tools and techniques they have applied to teach, coach and mentor them, describing the difference between these activities and analysing how they evaluated whether the individual's learning needs were met (K23, K24, S23, S24)</p> <p>Explains how they have actively empowered and educated individuals to maximise their own health and well-being clarifying how these opportunities link to national and local strategies, priorities and initiatives for promoting and improving public health (K25, S25)</p> <p>Reviews when they have promoted preventative health behaviours and supported individuals to make informed choices to improve their health and wellbeing justifying their input by relating any decisions taken or advice given to the wider determinants of health (K26, S26)</p>	<p>Critically evaluates the strategies, tools and techniques used for teaching, coaching and mentoring justifying their conclusions using real life examples and analysis of the impact of learning activities (K23, K24, S23, S24)</p>
<p>Quality</p>	<p>Discusses the methods and indicators used to measure quality explaining</p>	<p>Critically evaluates the different methods of data collection,</p>

<p>improvement and research K31 K32 K33 S31 S32 S33</p>	<p>own role in audit or a quality improvement activity, clarifying how these methods and indicators are used to inform and develop a quality improvement plan (K31, S31)</p> <p>Summarises their own role in conducting research activities, assessing the rationale and ethical considerations for undertaking the research activity and how they used a literature review or interrogated an existing evidence base and describing how they acted on their findings (K32, S32)</p> <p>Evaluates the opportunities they have had to improve quality in the workplace explaining how they have collected and interpreted research data and applied the findings to their own practice or to support local, regional or national quality improvement initiatives (K33, S33)</p>	<p>comparing and contrasting how the data can be used to inform quality improvement initiatives and their own work (K33, S33)</p>
<p>Risk management, health and safety K27 K28 S27 S28</p>	<p>Conducts and records risk assessments relevant to the activity in line with local, national organisational policies and procedures' (K27, S27)</p> <p>Describes instances where they have managed challenging situations and unsafe work practices, addressing comments, compliments, conflict and complaints, and evaluating how they have upheld the principles of a duty of candour (K28, S28)</p>	<p>Critically evaluates the methods for conducting and recording risk assessments within the scope of their own practice (K27, S27)</p>

Overall EPA grading

The EPA methods contribute equally to the overall EPA grade.

Performance in the EPA will determine the apprenticeship grade of:

- fail
- pass
- distinction

Independent assessors must individually grade the (assessment methods) according to the requirements set out in this plan.

EPAOs must combine the individual assessment method grades to determine the overall EPA grade.

Apprentices who fail one or more assessment method will be awarded an overall EPA fail.

Grades from individual assessment methods should be combined in the following way to determine the grade of the EPA as a whole.

Apprentices must achieve at least a pass in all the EPA methods to get an overall pass: In order to gain an overall EPA 'pass', apprentices must achieve a pass in all the assessment methods. In order to achieve an overall EPA 'distinction', apprentices must achieve a pass in the observation of practice and a distinction in the professional discussion.

OBSERVATION OF PRACTICE	PROFESSIONAL DISCUSSION UNDERPINNED BY A PORTFOLIO OF EVIDENCE	OVERALL GRADING
Fail	Any grade	Fail
Any grade	Fail	Fail
Pass	Pass	Pass
Pass	Distinction	Distinction

Re-sits and re-takes

Apprentices who fail one or more EPA method(s) can take a re-sit or a re-take at the employer's discretion. The apprentice's employer needs to agree that a re-sit or re-take is appropriate. A re-sit does not need further learning, whereas a re-take does.

Apprentices should have a supportive action plan to prepare for a re-sit or a re-take.

The employer and EPAO agree the timescale for a re-sit or re-take. A re-sit is typically taken within 3 months of the EPA outcome notification. The timescale for a re-take is dependent on how much re-training is required and is typically taken within 6 months of the EPA outcome notification.

Failed EPA methods must be re-sat or re-taken within a 6-month period from the EPA outcome notification, otherwise the entire EPA will need to be re-sat or re-taken in full.

Re-sits and re-takes are not offered to apprentices wishing to move from pass to a higher grade.

An apprentice will get a maximum EPA grade of pass for a re-sit or re-take, unless the EPAO determines there are exceptional circumstances.

Roles and responsibilities

ROLES	RESPONSIBILITIES
Apprentice	<p>As a minimum, apprentices should:</p> <ul style="list-style-type: none"> • participate in and complete on-programme training to meet the KSBs as outlined in the occupational standard for a minimum of 12 months • undertake 20% off-the-job training as arranged by the employer and training provider • understand the purpose and importance of EPA • undertake the EPA including meeting all gateway requirements.
Employer	<p>As a minimum, employers must:</p> <ul style="list-style-type: none"> • select the EPAO and training provider • work with the training provider (where applicable) to support the apprentice in the workplace and to provide the opportunities for the apprentice to develop the KSBs • arrange and support a minimum of 20% off-the-job training to be undertaken by the apprentice • decide when the apprentice is working at or above the level required by the occupational standard and so is ready for EPA • ensure that all supporting evidence required at the gateway is submitted in accordance with this EPA plan • remain independent from the delivery of the EPA • confirm arrangements with the EPAO for the EPA (who, when, where) in a timely manner (including providing access to any employer-specific documentation as required, for example company policies) • ensure that the EPA is scheduled with the EPAO for a date and time which allows appropriate opportunity for the apprentice to meet the KSBs • ensure the apprentice is well prepared for the EPA • require the training provider and EPAO to ensure the EPA is booked in a timely manner <p>Post-gateway, employers must:</p> <ul style="list-style-type: none"> • confirm arrangements with the EPAO for the EPA (who, when, where) in a timely manner (including providing access to any

	<p>employer-specific documentation as required, for example company policies)</p> <ul style="list-style-type: none"> • ensure that the EPA is scheduled with the EPAO for a date and time which allows appropriate opportunity for the KSBs to be met • remain independent from the delivery of the EPA • ensure the apprentice is given sufficient time away from regular duties to prepare for, and complete all post-gateway elements of the EPA, and that any required supervision during this time (as stated within this EPA plan) is in place • where the apprentice is assessed in the workplace, ensure that the apprentice has access to the resources used on a daily basis • pass the certificate to the apprentice upon receipt from the EPAO.
EPAO	<p>As a minimum, EPAOs must:</p> <ul style="list-style-type: none"> • conform to the requirements of this EPA plan and deliver its requirements in a timely manner • conform to the requirements of the Register of End-Point Assessment Organisations (RoEPAO) • conform to the requirements of the external quality assurance provider (EQAP) for this apprenticeship standard • understand the occupational standard • make all necessary contractual arrangements, including agreeing the price of the EPA • develop and produce assessment materials including specifications and marking materials (for example mark schemes, practice materials, training material) • appoint suitably qualified and competent independent assessors and oversee their working • appoint administrators (and invigilators where required) to administer the EPA as appropriate • provide training for independent assessors in terms of good assessment practice, operating the assessment tools and grading • provide adequate information, advice and guidance documentation to enable apprentices, employers and training providers to prepare for the EPA • arrange for the EPA to take place, in consultation with the employer

- where the apprentice is not assessed in the workplace, ensure that the apprentice has access to the required resources and liaise with the employer to agree this if necessary
- develop and provide appropriate assessment recording documentation to ensure a clear and auditable process is in place for providing assessment decisions and feedback to all relevant stakeholders
- have no direct connection with the apprentice, their employer or training provider. In all instances, including when the EPAO is the training provider (i.e. HEI), there must be no conflict of interest
- have policies and procedures for internal quality assurance (IQA), and maintain records of regular and robust IQA activity and moderation for external quality assurance (EQA) purposes
- deliver induction training for independent assessors, and for invigilators and/or markers (where used)
- undertake standardisation activity on this apprenticeship standard for all independent assessors before they conduct an EPA for the first time, if the EPA is updated and periodically as appropriate (a minimum of annually)
- manage invigilation of apprentices in order to maintain security of the assessment in line with the EPAO's malpractice policy
- verify the identity of the apprentice being assessed
- use language in the development and delivery of the EPA that is appropriate to the level of the occupational standard

Pre-gateway, EPAOs must:

- make all necessary contractual arrangements, including agreeing the price of the EPA
- provide adequate information, advice and guidance documentation to enable apprentices, employers and training providers to prepare for the EPA
- arrange for the EPA to take place, in consultation with the employer.

At the Gateway, EPAOs must:

- confirm all gateway requirements have been met as quickly as possible.

Post-gateway, EPAOs must:

- where the apprentice is not assessed in the workplace, ensure that the apprentice has access to the required resources and liaise

	with the employer to agree this if necessary
Independent assessor	<p>As a minimum, independent assessors must:</p> <ul style="list-style-type: none"> • have the competence to assess the apprentice at this level and hold any required qualifications and experience in line with the requirements of the independent assessor as detailed in the IQA section of this EPA plan • understand the occupational standard and the requirements of this EPA • have, maintain and be able to evidence, up-to-date knowledge and expertise of the subject matter • deliver the end-point assessment in-line with the EPA plan • comply with the IQA requirements of the EPAO • have no direct connection or conflict of interest with the apprentice, their employer or training provider; in all instances, including when the EPAO is the training provider (i.e. HEI) • attend induction training • attend standardisation events when they begin working for the EPAO, before they conduct an EPA for the first time and a minimum of annually on this apprenticeship standard • assess each assessment method, as determined by the EPA plan, and without extending the EPA unnecessarily • assess against the KSBs assigned to each assessment method, as shown in the mapping of assessment methods and as determined by the EPAO, and without extending the EPA unnecessarily • make all grading decisions • record and report all assessment outcome decisions, for each apprentice, following instructions and using assessment recording documentation provided by the EPAO, in a timely manner • use language in the development and delivery of the EPA that is appropriate to the level of the occupational standard • mark open (constructed) test answers accurately according to the EPAO's mark scheme and procedures.
Training provider	<p>As a minimum, training providers should:</p> <ul style="list-style-type: none"> • work with the employer and support the apprentice during the off-the-job training to provide the opportunities to develop the

knowledge, skills and behaviours as listed in the occupational standard

- conduct training covering any knowledge, skill or behaviour requirement agreed as part of the Commitment Statement (often known as the Individual Learning Plan).
- monitor the apprentice's progress during any training provider led on-programme learning
- advise the employer, upon request, on the apprentice's readiness for EPA
- remain independent from delivery of the EPAO. Where the training provider is the EPA (i.e. a HEI) there must be procedures in place to mitigate against any conflict of interest.

Reasonable adjustments

The EPAO must have reasonable adjustments arrangements for the EPA.

This should include:

- how an apprentice qualifies for reasonable adjustment
- what reasonable adjustments may be made

Adjustments must maintain the validity, reliability and integrity of the EPA as outlined in this EPA plan.

Internal quality assurance (IQA)

Internal quality assurance refers to how EPAOs ensure valid, consistent and reliable EPA decisions. EPAOs must adhere to the requirements within the roles and responsibilities section and:

- have effective and rigorous quality assurance systems and procedures that ensure fair, reliable and consistent EPA regardless of employer, place, time or independent assessor
- appoint independent assessors who are competent to deliver the EPA and who:
 - have recent relevant experience of the occupation or sector to at least occupational level 5 gained in the last 5 years or significant experience of the occupation or sector
 - meet the following minimum requirements:
 - be occupationally competent against the apprenticeship standard
 - keep up to date with continuing professional development (cpd)
- operate induction training for anyone involved in the delivery and/or assessment of the EPA
- provide training for independent assessors in good assessment practice, operating the assessment tools and making grading decisions

- provide ongoing training for markers and invigilators
- provide standardisation activity for this apprenticeship standard for all independent assessors:
 - before they conduct an EPA for the first time
 - if the EPA is updated
 - periodically as appropriate (a minimum of annually)
- conduct effective moderation of EPA decisions and grades
- conduct appeals where required, according to the EPAO's appeals procedure, reviewing and making final decisions on EPA decisions and grades
- have no direct connection with the apprentice, their employer or training provider. In all instances, including when the EPAO is the training provider (for example a higher education institution)

Value for money

Affordability of the EPA will be aided by using at least some of the following:

- utilising digital remote platforms to conduct applicable assessment methods
- using the employer's premises

Professional recognition

Professional body recognition is not relevant to this occupational apprenticeship.

Mapping of KSBs to assessment methods

KNOWLEDGE	ASSESSMENT METHODS
<p>K1 The legislation, policies, standards, local ways of working and codes of conduct that apply to own role</p>	Observation of practice
<p>K2 The scope of own practice, limitations of own competence and who to ask for support</p>	Observation of practice
<p>K3 The principles of equality, diversity and inclusion and providing person-centred care and support, including consent, active participation and choice</p>	Observation of practice
<p>K4 The principles of a 'duty of care', 'safeguarding' and 'protection' as they apply to adults and children, the signs of harm and abuse and how to reduce the risk of harm and abuse</p>	Observation of practice
<p>K5 The normal ranges expected when taking physiological, technical and psychological measurements and the significance of a variation from the normal range</p>	Observation of practice
<p>K6 The types of assessment relevant to the individual's physical and mental health and wellbeing and the factors that may influence and impact assessment</p>	Observation of practice
<p>K7 The signs that an individual is in pain, distress or discomfort</p>	Observation of practice
<p>K8 The signs of change in an individual's health and wellbeing, including the indications of when to intervene within the scope of practice and when to escalate</p>	Observation of practice
<p>K9 The principles of maintaining nutrition and fluid balance and the signs and symptoms of inadequate nutrition and fluid intake</p>	Observation of practice

<p>K10 Clinical, diagnostic and therapeutic interventions within the scope of own role and the underpinning principles to select equipment and tools in the context of the intervention</p>	Observation of practice
<p>K11 The signs that an individual's health and well-being is changing as a result of a clinical, diagnostic or therapeutic intervention</p>	Professional discussion underpinned by a portfolio of evidence
<p>K12 Ways to record and store information securely, including the safe use of technology</p>	Observation of practice
<p>K13 The principles of confidentiality, duty of confidence and disclosure</p>	Observation of practice
<p>K14 The frameworks and principles of team working including delegation, accountability and supervision in the workplace</p>	Professional discussion underpinned by a portfolio of evidence
<p>K15 The structural and strategic environment in which health and social care services operate and how these impact on own role</p>	Professional discussion underpinned by a portfolio of evidence
<p>K16 Methods of communication to use in the workplace, including how to overcome barriers and challenges</p>	Professional discussion underpinned by a portfolio of evidence
<p>K17 The benefits of digital solutions for improving communication systems and practices</p>	Professional discussion underpinned by a portfolio of evidence
<p>K18 The meaning of 'capacity', the differences between mental illness, dementia and learning disability, and the impact of these conditions</p>	Professional discussion underpinned by a portfolio of evidence
<p>K19 How to identify and evaluate own learning and development needs</p>	Professional discussion underpinned by a portfolio of evidence
<p>K20 How to use feedback to create a personal development plan</p>	Professional discussion underpinned by a

	portfolio of evidence
K21 Models of reflective practices used in health and care and how reflection can be used to improve own practice	Professional discussion underpinned by a portfolio of evidence
K22 The principles and styles of leadership in relation to own role and place of work and the relationship between leadership and management	Professional discussion underpinned by a portfolio of evidence
K23 The tools and techniques used to identify learning needs and learning styles	Professional discussion underpinned by a portfolio of evidence
K24 The relationship between teaching, coaching and mentoring, and how to evaluate if individuals' learning needs have been met	Professional discussion underpinned by a portfolio of evidence
K25 National and local strategies, priorities, and initiatives for promoting and improving public health	Professional discussion underpinned by a portfolio of evidence
K26 The wider determinants of health such as the contribution of social influences, health literacy, individual circumstances, behaviours and lifestyle choices on health and wellbeing	Professional discussion underpinned by a portfolio of evidence
K27 The principles of risk management and the hazards and risks associated with the scope of own practice	Professional discussion underpinned by a portfolio of evidence
K28 The principles of a duty of candour, and techniques for managing challenging situations, unsafe work practices, addressing comments, compliments, conflict and complaints	Professional discussion underpinned by a portfolio of evidence
K29 The principles of infection prevention and control, when and how to select the right personal protective equipment for self and others and how to handle hazardous materials and substances	Observation of practice

<p>K30 How to move and assist individuals safely and how to move and handle equipment and other objects safely</p>	Observation of practice
<p>K31 Methods and indicators used to measure quality, their application in health and care and how they inform a quality improvement plan</p>	Professional discussion underpinned by a portfolio of evidence
<p>K32 The rationale and ethical considerations for undertaking research activity and how to review literature and interrogate the existing evidence base</p>	Professional discussion underpinned by a portfolio of evidence
<p>K33 Methods for collecting research data and how to interpret and apply findings to own and others' practice</p>	Professional discussion underpinned by a portfolio of evidence
<p>K34 The structure and function of human body systems and how they relate to and impact on each other</p>	Observation of practice
<p>K35 The relationship between health and well-being and the principles and philosophy of the biomedical, sociological and psychological models in providing holistic health and care</p>	Observation of practice
<p>K36 The stages and processes of human development and how health and wellbeing needs vary throughout the lifespan</p>	Observation of practice

SKILL	ASSESSMENT METHODS
<p>S1 Work in line with legislation, policies, standards and codes of conduct that apply to own role</p>	Observation of practice
<p>S2 Work within the scope of practice, the limits of own knowledge and skills, escalating and reporting to others when needed</p>	Observation of practice
<p>S3 Work in partnership with others to champion safe, equitable, non-discriminatory person-centred care and support for individuals</p>	Observation of practice
<p>S4 Promote and maintain the principles of a duty of care, safeguarding and protection, always acting in the best interest of individuals and working across organisations and with other agencies to ensure they do not come to harm</p>	Observation of practice
<p>S5 Undertake and monitor physiological, technical and psychological measurements using the appropriate equipment and tools within scope of own practice</p>	Observation of practice
<p>S6 Select and use the correct equipment and tools to undertake timely assessment of an individual's physical and mental healthcare status within own scope of practice</p>	Observation of practice
<p>S7 Recognise and respond to an individual in pain, distress or discomfort</p>	Observation of practice
<p>S8 Interpret results of assessment in the context of the individual's health and wellbeing, making appropriate changes or recommendations to the care plan within scope of own practice or escalating in line with local protocol</p>	Observation of practice
<p>S9 Support individuals with nutrition and fluids in line with their care needs, taking action as required</p>	Observation of practice

<p>S10 Undertake evidence-based clinical, diagnostic or therapeutic interventions delegated by a registered healthcare professional in line with scope of practice, and standard operating procedures</p>	<p>Observation of practice</p>
<p>S11 Monitor and review the impact of clinical, diagnostic or therapeutic interventions on an individual's health and well-being</p>	<p>Professional discussion underpinned by a portfolio of evidence</p>
<p>S12 Record and store information related to individuals securely and in line with local and national policies, including the safe use of technology</p>	<p>Observation of practice</p>
<p>S13 Report and share information related to individuals securely and in line with local and national policies, maintaining confidentiality</p>	<p>Observation of practice</p>
<p>S14 Delegate work to colleagues in the multi-disciplinary team and engage in supervision</p>	<p>Professional discussion underpinned by a portfolio of evidence</p>
<p>S15 Liaise with the multidisciplinary team to prioritise and manage own workload</p>	<p>Professional discussion underpinned by a portfolio of evidence</p>
<p>S16 Communicate with individuals, their families, carers and health and care professionals using techniques designed to maximise understanding</p>	<p>Professional discussion underpinned by a portfolio of evidence</p>
<p>S17 Promote the use of digital solutions to improve communication systems and practices</p>	<p>Professional discussion underpinned by a portfolio of evidence</p>
<p>S18 Recognise and respond to limitations in an individual's mental capacity</p>	<p>Professional discussion underpinned by a portfolio of evidence</p>
<p>S19</p>	<p>Professional discussion underpinned by a</p>

Participate in training and development activities and evaluate the impact of learning on own practice	portfolio of evidence
S20 Seek out and respond to feedback and engage in appraisals	Professional discussion underpinned by a portfolio of evidence
S21 Reflect on own practice to improve practice	Professional discussion underpinned by a portfolio of evidence
S22 Provide leadership and act as a role model for others within the scope of own role	Professional discussion underpinned by a portfolio of evidence
S23 Identify learning and development needs of others	Professional discussion underpinned by a portfolio of evidence
S24 Teach, coach and mentor others and confirm that learning needs have been met	Professional discussion underpinned by a portfolio of evidence
S25 Actively seek out and act on opportunities to support individuals to maximise their health and well-being within the scope of the role	Professional discussion underpinned by a portfolio of evidence
S26 Promote preventative health behaviours and support individuals to make informed choices to improve their health and wellbeing within the scope of the role	Professional discussion underpinned by a portfolio of evidence
S27 Conduct and record risk assessments relevant to the activity and scope of own practice	Professional discussion underpinned by a portfolio of evidence
S28 Uphold the principles of duty of candour, identifying and managing challenging situations, unsafe work practices and addressing comments, compliments, conflict and complaints	Professional discussion underpinned by a portfolio of evidence
S29	Observation of practice

Maintain a safe and healthy working environment for self and others, using techniques for infection prevention and control, including the use of Personal Protective Equipment (PPE) and supporting others to comply with policy and procedures	
S30 Move and assist individuals, equipment and other items safely	Observation of practice
S31 Participate in and support others in audit and quality improvement activities in the workplace	Professional discussion underpinned by a portfolio of evidence
S32 Conduct research activity within the scope of own role and act on the findings	Professional discussion underpinned by a portfolio of evidence
S33 Identify opportunities to improve quality in the workplace and contribute to local, regional and national quality improvement initiatives	Professional discussion underpinned by a portfolio of evidence

BEHAVIOUR	ASSESSMENT METHODS
B1 Treat people with dignity	Observation of practice
B2 Show respect and empathy for those you work with	Professional discussion underpinned by a portfolio of evidence
B3 Be adaptable, reliable and consistent	Observation of practice

Mapping of KSBs to grade themes

Observation of practice - Observation

KSBS GROUPED BY THEME	KNOWLEDGE	SKILLS	BEHAVIOUR
<p>Working to protocol K1 K2 K3 K4 S1 S2 S3 S4 B1 B3</p>	<p>The legislation, policies, standards, local ways of working and codes of conduct that apply to own role (K1)</p> <p>The scope of own practice, limitations of own competence and who to ask for support (K2)</p> <p>The principles of equality, diversity and inclusion and providing person-centred care and support, including consent, active participation and choice (K3)</p> <p>The principles of a 'duty of care', 'safeguarding' and 'protection' as they apply to adults and children, the signs of harm and abuse and how to reduce the risk of harm and abuse (K4)</p>	<p>Work in line with legislation, policies, standards and codes of conduct that apply to own role (S1)</p> <p>Work within the scope of practice, the limits of own knowledge and skills, escalating and reporting to others when needed (S2)</p> <p>Work in partnership with others to champion safe, equitable, non-discriminatory person-centred care and support for individuals (S3)</p> <p>Promote and maintain the principles of a duty of care, safeguarding and protection, always acting in the best interest of individuals and working across organisations and with other agencies to ensure they do not come to harm (S4)</p>	<p>Treat people with dignity (B1)</p> <p>Be adaptable, reliable and consistent (B3)</p>
<p>Assessment of individuals K5 K6 K7 S5 S6 S7</p>	<p>The normal ranges expected when taking physiological, technical and psychological measurements and the significance of a</p>	<p>Undertake and monitor physiological, technical and psychological measurements using the appropriate</p>	<p>N/A</p>

	<p>variation from the normal range (K5)</p> <p>The types of assessment relevant to the individual's physical and mental health and wellbeing and the factors that may influence and impact assessment (K6)</p> <p>The signs that an individual is in pain, distress or discomfort (K7)</p>	<p>equipment and tools within scope of own practice (S5)</p> <p>Select and use the correct equipment and tools to undertake timely assessment of an individual's physical and mental healthcare status within own scope of practice (S6)</p> <p>Recognise and respond to an individual in pain, distress or discomfort (S7)</p>	
<p>Provision of care K8 K9 K10 K34 K35 K36 S8 S9 S10 S29</p>	<p>The signs of change in an individual's health and wellbeing, including the indications of when to intervene within the scope of practice and when to escalate (K8)</p> <p>The principles of maintaining nutrition and fluid balance and the signs and symptoms of inadequate nutrition and fluid intake (K9)</p> <p>Clinical, diagnostic and therapeutic interventions within the scope of own role and the underpinning principles to select equipment and tools</p>	<p>Interpret results of assessment in the context of the individual's health and wellbeing, making appropriate changes or recommendations to the care plan within scope of own practice or escalating in line with local protocol (S8)</p> <p>Support individuals with nutrition and fluids in line with their care needs, taking action as required (S9)</p> <p>Undertake evidence-based clinical, diagnostic or therapeutic interventions</p>	<p>N/A</p>

	<p>in the context of the intervention (K10)</p> <p>The structure and function of human body systems and how they relate to and impact on each other (K34)</p> <p>The relationship between health and well-being and the principles and philosophy of the biomedical, sociological and psychological models in providing holistic health and care (K35)</p> <p>The stages and processes of human development and how health and wellbeing needs vary throughout the lifespan (K36)</p>	<p>delegated by a registered healthcare professional in line with scope of practice, and standard operating procedures (S10)</p> <p>Maintain a safe and healthy working environment for self and others, using techniques for infection prevention and control, including the use of Personal Protective Equipment (PPE) and supporting others to comply with policy and procedures (S29)</p>	
<p>Information governance K12 K13 S12 S13</p>	<p>Ways to record and store information securely, including the safe use of technology (K12)</p> <p>The principles of confidentiality, duty of confidence and disclosure (K13)</p>	<p>Record and store information related to individuals securely and in line with local and national policies, including the safe use of technology (S12)</p> <p>Report and share information related to individuals securely and in line with local and national policies, maintaining confidentiality (S13)</p>	N/A

<p>Health and safety K29 K30 S30</p>	<p>The principles of infection prevention and control, when and how to select the right personal protective equipment for self and others and how to handle hazardous materials and substances (K29)</p> <p>How to move and assist individuals safely and how to move and handle equipment and other objects safely (K30)</p>	<p>Move and assist individuals, equipment and other items safely (S30)</p>	<p>N/A</p>
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Professional discussion underpinned by a portfolio of evidence - Discussion

KSBS GROUPED BY THEME	KNOWLEDGE	SKILLS	BEHAVIOUR
Provision of care K11 K18 S11 S18	<p>The signs that an individual's health and well-being is changing as a result of a clinical, diagnostic or therapeutic intervention (K11)</p> <p>The meaning of 'capacity', the differences between mental illness, dementia and learning disability, and the impact of these conditions (K18)</p>	<p>Monitor and review the impact of clinical, diagnostic or therapeutic interventions on an individual's health and well-being (S11)</p> <p>Recognise and respond to limitations in an individual's mental capacity (S18)</p>	N/A
Communication K16 K17 S16 S17 B2	<p>Methods of communication to use in the workplace, including how to overcome barriers and challenges (K16)</p> <p>The benefits of digital solutions for improving communication systems and practices (K17)</p>	<p>Communicate with individuals, their families, carers and health and care professionals using techniques designed to maximise understanding (S16)</p> <p>Promote the use of digital solutions to improve communication systems and practices (S17)</p>	Show respect and empathy for those you work with (B2)
Teamwork, role modelling and leadership K14 K15 K22 S14 S15 S22	<p>The frameworks and principles of team working including delegation, accountability and supervision in the workplace (K14)</p>	<p>Delegate work to colleagues in the multi-disciplinary team and engage in supervision (S14)</p> <p>Liaise with the multidisciplinary</p>	N/A

	<p>The structural and strategic environment in which health and social care services operate and how these impact on own role (K15)</p> <p>The principles and styles of leadership in relation to own role and place of work and the relationship between leadership and management (K22)</p>	<p>team to prioritise and manage own workload (S15)</p> <p>Provide leadership and act as a role model for others within the scope of own role (S22)</p>	
<p>CPD and reflection K19 K20 K21 S19 S20 S21</p>	<p>How to identify and evaluate own learning and development needs (K19)</p> <p>How to use feedback to create a personal development plan (K20)</p> <p>Models of reflective practices used in health and care and how reflection can be used to improve own practice (K21)</p>	<p>Participate in training and development activities and evaluate the impact of learning on own practice (S19)</p> <p>Seek out and respond to feedback and engage in appraisals (S20)</p> <p>Reflect on own practice to improve practice (S21)</p>	N/A
<p>Empowering and educating K23 K24 K25 K26 S23 S24 S25 S26</p>	<p>The tools and techniques used to identify learning needs and learning styles (K23)</p> <p>The relationship between teaching, coaching and mentoring, and how to evaluate if individuals' learning</p>	<p>Identify learning and development needs of others (S23)</p> <p>Teach, coach and mentor others and confirm that learning needs have been met (S24)</p> <p>Actively seek out and act on opportunities to support individuals</p>	N/A

	<p>needs have been met (K24)</p> <p>National and local strategies, priorities, and initiatives for promoting and improving public health (K25)</p> <p>The wider determinants of health such as the contribution of social influences, health literacy, individual circumstances, behaviours and lifestyle choices on health and wellbeing (K26)</p>	<p>to maximise their health and well-being within the scope of the role (S25)</p> <p>Promote preventative health behaviours and support individuals to make informed choices to improve their health and wellbeing within the scope of the role (S26)</p>	
<p>Quality improvement and research K31 K32 K33 S31 S32 S33</p>	<p>Methods and indicators used to measure quality, their application in health and care and how they inform a quality improvement plan (K31)</p> <p>The rationale and ethical considerations for undertaking research activity and how to review literature and interrogate the existing evidence base (K32)</p> <p>Methods for collecting research data and how to interpret and apply findings to own and others' practice (K33)</p>	<p>Participate in and support others in audit and quality improvement activities in the workplace (S31)</p> <p>Conduct research activity within the scope of own role and act on the findings (S32)</p> <p>Identify opportunities to improve quality in the workplace and contribute to local, regional and national quality improvement initiatives (S33)</p>	N/A

<p>Risk management, health and safety K27 K28 S27 S28</p>	<p>The principles of risk management and the hazards and risks associated with the scope of own practice (K27)</p> <p>The principles of a duty of candour, and techniques for managing challenging situations, unsafe work practices, addressing comments, compliments, conflict and complaints (K28)</p>	<p>Conduct and record risk assessments relevant to the activity and scope of own practice (S27)</p> <p>Uphold the principles of duty of candour, identifying and managing challenging situations, unsafe work practices and addressing comments, compliments, conflict and complaints (S28)</p>	<p>N/A</p>
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Version log

Version	Change detail	Earliest start date	Latest start date	Latest end date
<p>Revised version awaiting implementation</p>	<p>In revision</p>	<p>01/02/2023</p>	<p>Not set</p>	<p>Not set</p>
<p>1.0</p>	<p>Approved for delivery. The funding band for this standard has been reviewed and remains at £12000. (May-2018).</p>	<p>19/05/2016</p>	<p>22/02/2023</p>	<p>Not set</p>

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