Level 3 Diploma in Health and Social Care



Qualification Specification

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Qualification Purpose and Aims

The EBMA Level 3 Diploma in Health and Social Care is designed to provide learners with the knowledge, skills, and professional values required to work effectively in a wide range of health and social care contexts. The qualification aims to ensure that learners can apply theoretical understanding to practical situations, enabling them to deliver safe, ethical, and person-centred care.

The purpose of the qualification is to:

- Equip learners with a strong foundation in the principles, values, and frameworks of health and social care.
- Develop learners' ability to communicate effectively, handle information responsibly, and work collaboratively in professional care environments.
- Promote awareness of safeguarding, health and safety, and wellbeing in care settings.
- Provide learners with specialist knowledge in key areas such as dementia care, stroke recovery, diabetes management, nutrition, health promotion, and end-of-life support.
- Support personal and professional development, reflective practice, and progression into higher-level study or employment in the health and social care sector.

This diploma is suitable for individuals seeking to enter the care profession, as well as those already working in the sector who wish to formalise their experience with a recognised qualification. It is also intended as a progression pathway for learners aiming to advance into nursing, social work, community health, or related professions.

Qualification Overview

The EBMA Level 3 Diploma in Health and Social Care is a comprehensive qualification designed to provide learners with the essential knowledge, skills, and values required to work effectively across the health and social care sector. Unlike many programmes, this diploma incorporates a full suite of twelve mandatory units, ensuring that every learner develops both a broad foundation and specialist insight into key areas of practice. The programme carries 120 credits, reflecting its depth, scope, and progression value.

The qualification begins by establishing the core foundations of practice, including the principles, values, and regulatory frameworks that underpin health and social care. Learners develop a strong understanding of professional roles and responsibilities, person-centred and inclusive approaches, communication and information management, and the importance of health, safety, safeguarding, and wellbeing. These units equip learners with the essential competencies required in every care role, from supporting individuals' dignity and rights to working within legal and ethical frameworks.

Building on this foundation, the qualification integrates specialist units that address some of the most significant health and care needs in contemporary practice. Learners study dementia, stroke, and diabetes care, developing the knowledge required to provide tailored, compassionate support for individuals with long-term conditions. Units on nutrition and healthy living and promoting health in communities emphasise the role of prevention, lifestyle, and public health in improving outcomes. The inclusion of an end-of-life and palliative care unit ensures that learners are also equipped to provide sensitive, dignified, and culturally responsive support at the final stages of life.

By the end of the course, learners will be able to:

- Demonstrate knowledge and understanding of the principles, values, and regulatory frameworks that underpin safe, ethical, and effective practice in health and social care.
- Apply person-centred approaches that promote dignity, choice, independence, equality, diversity, and inclusion in all aspects of care delivery.
- Communicate effectively with service users, families, colleagues, and external professionals using verbal, non-verbal, and written methods, while maintaining confidentiality and professionalism.
- Manage and handle information responsibly, in compliance with legal, ethical, and organisational requirements.
- Recognise and respond to safeguarding concerns, applying appropriate procedures to protect individuals from harm, abuse, or neglect.

- Promote health, safety, and wellbeing in care settings through risk awareness, safe practices, and sustainable approaches.
- Understand and apply specialist knowledge in relation to dementia care, stroke recovery, diabetes management, nutrition, health promotion, and end-of-life and palliative care.
- Support the physical, emotional, social, and cultural needs of individuals at different life stages and with diverse health and social care needs.
- Work collaboratively as part of a multidisciplinary team, understanding professional roles, responsibilities, and the importance of maintaining professional boundaries.
- Reflect on personal performance and professional practice, identifying strengths and areas for improvement.
- Engage in continuous professional development (CPD) to maintain competence, enhance skills, and support long-term career progression.
- Demonstrate employability skills and professional behaviours that prepare them for roles in health and social care, health support, and related community-based services.

Assessment is through a portfolio of evidence, including assignments, case studies, reflective accounts, presentations, projects, and practical demonstrations. This ensures learners are able to apply theory to practice, reflect on personal development, and demonstrate occupational competence in line with industry expectations.

Progression Opportunities

The EBMA Level 3 Diploma in Health and Social Care provides a solid foundation for learners wishing to progress within the health and social care sector. Successful completion of this qualification demonstrates that learners have acquired the knowledge, skills, and professional behaviours required to enter employment or advance their studies.

Progression to Further Study

Learners may progress to higher-level qualifications in health and social care or related disciplines, such as:

- EBMA Level 4 Diploma in Health and Social Care
- Other Level 4 qualifications in health, social care, or management

Progression to Employment

This qualification also prepares learners for a wide range of entry-level and supervisory roles within health and social care, including:

- Care Assistant / Support Worker
- Domiciliary Care Worker
- Healthcare Support Worker
- Residential Care Worker

- Community Health Worker
- Team Leader in health and social care settings

Why EBMA Level 3 Diploma in Health and Social Care

For Learners

- Gain a recognised qualification that provides entry into the health and social care sector.
- Build a strong foundation of knowledge and skills required for roles such as care assistant, support worker, or community care worker.
- Develop confidence in applying person-centred values that promote dignity, equality, diversity, and inclusion.
- Learn to communicate effectively with service users, families, and colleagues in professional settings.
- Acquire specialist knowledge in high-demand areas such as dementia, stroke, diabetes, nutrition, and end-of-life care.
- Improve employability by gaining practical, workplace-relevant skills through applied assignments and case studies.
- Create a platform for further study and career progression, including routes into nursing, social work, and higher-level health and social care qualifications.

For Employers

- Access a workforce trained to nationally recognised standards in health and social care.
- Benefit from employees who understand and apply professional codes of practice, safeguarding, and regulatory requirements.
- Employ staff who can deliver safe, ethical, and person-centred care in line with organisational and sector expectations.
- Gain team members with specialist knowledge of key health issues (dementia, diabetes, stroke, nutrition, and palliative care).
- Support organisational development by having staff trained in communication, teamwork, and inclusive practice.
- Ensure compliance with regulatory bodies and sector expectations through staff trained in health, safety, and safeguarding responsibilities.
- Invest in a qualification that promotes staff retention and progression, supporting continuous professional development (CPD).

Course Structure

Learners are required to complete 12 units to achieve the full Level 3 Diploma in Health and Social Care (120 credits).

Number	Code	Title	Credits
Unit 01	HS/HSP/104	Foundations of Health and Social Care Practice	10
Unit 02	HS/CIM/105	Effective Communication and Information	10
		Management in Care	
Unit 03	HS/PIC/106	Person-Centred and Inclusive Care Practices	10
Unit 04	HS/PRD/107	Professional Roles, Responsibilities and	10
		Development	
Unit 05	HS/PVR/108	Principles, Values and Regulatory Frameworks	10
		in Care	
Unit 06	HS/HSW/109	Health, Safety, Safeguarding and Wellbeing in	10
		Care Settings	
Unit 07	HS/PHW/110	Promoting Health and Wellbeing in	10
		Communities	
Unit 08	HS/NHL/III	Nutrition and Healthy Living in Health and	10
		Social Care	
Unit 09	HS/DSC/112	Understanding Dementia and Supportive Care	10
Unit 10	HS/SAR/113	Stroke Awareness and Recovery Support	10
Unit II	HS/DAC/114	Diabetes Awareness and Care Management	10
Unit 12	HS/EPC/115	End-of-Life and Palliative Care	10

Entry Requirement

Learner(s) must fulfil the following criteria to be allowed entry to Level 3 Diploma in Health and Social Care.

- Level 2 Diploma in Care OR
- Any qualification equivalent to one of the above
- Learners must be 18+ to undertake this qualification

Delivery Guidance

Centres delivering the EBMA Level 3 Diploma in Health and Social Care are expected to adopt a learner-centred and inclusive approach to teaching and learning. Delivery should enable learners to develop both theoretical knowledge and practical skills through a balanced and engaging programme.

Key Principles of Delivery

- Variety of Methods: Teaching should incorporate lectures, seminars, workshops, group discussions, role-plays, simulations, and problem-solving activities to accommodate different learning styles.
- Practical Application: Centres should link theory to practice through case studies, workplace examples, projects, and scenarios that reflect real health and social care environments.
- Active Engagement: Learners should be encouraged to participate actively in learning through debates, peer-to-peer activities, reflective practice, and collaborative projects.
- Independent Learning: Delivery should support the development of independent study skills through guided reading, research tasks, reflective journals, and online learning resources.
- Blended and Digital Learning: Centres are encouraged to integrate digital tools and e-learning platforms to provide flexibility and broaden access to learning materials.
- Inclusivity and Accessibility: All teaching must be inclusive and fair, making reasonable adjustments to ensure learners with additional needs are able to fully participate.
- Professional Development: Tutors should encourage learners to reflect on their own personal and professional growth, linking their learning to career aspirations and continuing professional development (CPD).

Centres must ensure that teaching staff are appropriately qualified, occupationally competent, and experienced in health and social care, and that delivery is aligned with the qualification's aims, learning outcomes, and assessment requirements.

Learner Support and Reasonable Adjustments

EBMA is committed to ensuring that all learners have equal access to learning and assessment. Centres must provide appropriate support to meet the individual needs of learners, while maintaining the integrity of the qualification.

Learner Support

- Centres should provide induction sessions, study skills guidance, and ongoing academic support to enable learners to succeed.
- Tutors should encourage learners to engage in reflective practice, independent study, and personal development planning.
- Learners must have access to suitable resources, including libraries, digital platforms, and online learning materials.
- Additional tutorial support should be available for learners who may need extra help with understanding content, completing assignments, or preparing evidence.

Reasonable Adjustments

- Reasonable adjustments may be applied to ensure that learners with disabilities, learning difficulties, or temporary medical/physical conditions are not unfairly disadvantaged.
- Adjustments may include (but are not limited to):
 - Extra time for assessments
 - Modified materials (e.g., large print, braille, simplified text)
 - Assistive technology or alternative formats
 - o Use of a reader, scribe, or sign language interpreter
 - o Alternative assessment arrangements where appropriate
- All adjustments must be agreed in advance, documented, and applied in line with EBMA's policies and regulatory requirements.

Special Considerations

- Where learners are affected by unforeseen circumstances (e.g., illness, bereavement), centres may apply for special consideration on their behalf.
- Requests must be supported by appropriate evidence and submitted according to EBMA's procedures.

Assessment

Assessment for the EBMA Level 3 Diploma in Health and Social Care is designed to measure learners' knowledge, understanding, and ability to apply learning in practical contexts. The assessment approach ensures fairness, consistency, and validity while enabling learners to demonstrate competence across all twelve mandatory units.

Assessment Approach

- All units are internally assessed and subject to internal and external quality assurance.
- Evidence must show that the learner has achieved all learning outcomes and met all assessment criteria for each unit.
- Assessment is designed to encourage learners to apply theoretical knowledge to real workplace situations or simulated environments that reflect current sector practice.
- Evidence may be generated through a range of methods, including:
 - Written assignments and essays
 - Case studies and scenario-based tasks
 - o Reflective accounts and journals
 - Presentations and reports
 - Practical demonstrations, role plays, and simulations
 - Workplace evidence (where available) such as witness testimonies or records of practice
- Learners must produce evidence that is authentic, valid, sufficient, current, reliable, fair, and comparable.

Assessment Principles

All assessment decisions must meet the following principles:

- Authenticity evidence must be the learner's own work.
- Validity assessment must measure what it claims to measure, meeting all criteria.
- Reliability decisions must be consistent across assessors, learners, and centres.
- Sufficiency evidence must be adequate in quantity and depth to justify credit.
- Currency evidence must reflect recent learning or practice.
- Fairness assessment must be accessible, equitable, and free from bias.

Assessor Requirements

The primary responsibility of assessors is to evaluate learners' performance and knowledge across a range of tasks, ensuring that the competence and understanding demonstrated meet the required standards.

- Assessors must be occupationally competent in health and social care.
- They must hold or be working towards a recognised assessor qualification (e.g., A1, D32/D33, or equivalent mapped to national occupational standards).
- Assessors must engage in continuing professional development (CPD) to remain current in sector knowledge and assessment practice.

Internal Quality Assurance (IQA)

All assessment decisions are subject to internal quality assurance to ensure accuracy and consistency.

- IQAs will sample assessment decisions, standardise practice, and provide feedback to assessors.
- IQAs must hold or be working towards a recognised internal verifier/IQA qualification and maintain CPD in assessment and quality assurance.

External Quality Assurance (EQA)

- EBMA will appoint External Quality Assurers (EQAs) to monitor centres, ensuring assessment and IQA meet required standards.
- EQAs will review learner evidence, sampling, assessment decisions, and internal quality systems.
- Certificates will only be issued once EBMA has confirmed that assessment and IQA are valid, reliable, and consistent with qualification requirements.

Grading

- The qualification is awarded on a Pass/Fail basis.
- To achieve a Pass, learners must successfully demonstrate achievement of all learning outcomes and assessment criteria across the 12 units.

Certification

On successful completion of **twelve units** within the qualification structure, learners are awarded the Level 3 Diploma in Health and Social Care (120 Credits).

Unit Syllabuses

Unit Format

All units in the Level 3 Diploma in Health and Social Care have a standard format. The unit format gives guidance on the requirements of the qualification for learners, assessors, tutors, and those responsible for monitoring standards.

Each unit has following sections.

Unit Aim

Aim indicates the general direction or orientation of a unit/module, in terms of its content and sometimes its context within a programme.

Unit level

Level describes of what a learner is expected to achieve at the end of a level of study. Levels are hierarchical stages that represent increasingly challenging learning to a learner.

Guided learning hours

Guided learning hours (GLH) are defined as all the times when a tutor, trainer or facilitator is present to give specific guidance towards the learning aim being studied on a programme. This definition includes lectures, tutorials, and supervised study in; for example, open learning centres and learning workshops. It also includes time spent by staff assessing learners' achievements.

Unit code

Each unit is assigned a unique code that appears with the unit title of the qualification.

Credit value

All units have a credit value. The minimum credit value that may be determined for a unit is one, and credit can only be awarded in whole numbers. Learners will be awarded credit for the successful completion of whole units.

Learning outcomes

These are statements of what a learner is expected to know, understand or be able to do at the end of the unit and of how that learning will be demonstrated. Unlike aim, they are couched in terms of what the learner is expected to learn.

Assessment criteria

These are statements that indicate, in more detailed manner than the learning outcome, the quality of performance that will show that the learner has reached a particular standard that is reflected in the learning outcome.

The assessment method

Assessment methods are tasks that are undertaken by learners that is the subject of assessment. It provides the context for assessment criteria.

Teaching strategy

Teaching strategy is the support that needs to be given to learners to enable them to achieve the learning outcomes. There is recognition that the learning may be achieved without the involvement of teaching.

Unit content

The unit content identifies the breadth of knowledge, skills and understanding needed to design and deliver a programme of learning to achieve each of the learning outcomes. The content provides the range of subject material for programme of learning and specifies the skills, knowledge and understanding required of the unit.

Unit I: Found	dations of Health and Soc	ial Ca	re Practice				
Unit Aim	This unit introduces learners to the foundations of health and social care practice, exploring the purpose and scope of the sector, the diverse roles within the workforce, and the core values that underpin quality care. Learners will gain insight into how health and social care services improve lives, promote wellbeing, and support individuals in diverse settings.				practice, exploring the purpose and scope of the se within the workforce, and the core values that und Learners will gain insight into how health and socia		
Level	3	Cred	lit Value	10			
GLH	40	Unit	Number	HS/HSP/104			
Learning Out	tcomes	Asse	ssment Criteria	1			
The learner	will	The	learner can				
2. Unders respons care	tand the purpose and scope h and social care tand professional roles and sibilities in health and social tand the principles and valtunderpin good practice	1.2.	of health and soci individuals and color Differentiate bet and social care is Describe the rar cluding residentital, and commun Describe the key range of professi social care work Explain how prolaboratively with teams. Identify the esse qualities require care roles. Define the concestity, and inclusion evance to care profession evance to care profession and wellbeing. Evaluate the concestivation in the important care and the concestity is and inclusion evance to care profession.	eween types of health ervices age of care settings, in- al, domiciliary, hospinity provision. Tresponsibilities of a onals in the health and force. fessionals work colain multi-disciplinary ntial skills and personal d to work effectively in epts of equality, divernand explain their relaractice. Interpolation of the personal distribution in the personal distr			

Assessment must be carried out through a range of valid and reliable methods that measure achievement of all learning outcomes. Centres should ensure evidence is authentic, sufficient, and demonstrates learners' ability to apply knowledge in practice.

Assessment Methods

- Written assignment on the purpose, scope, and values of health and social care.
- Case study analysing roles and responsibilities of professionals.
- Short reflective account on personal values in practice.

Supplementary texts and readings:

Department of Health and Social Care (2022). Health and Social Care Act: Policy and Guidance.

- Provides the legal and policy framework underpinning health and social care in England.

Lishman, J. (2017). Handbook for Practice Learning in Social Work and Social Care (3rd ed.). Jessica Kingsley.

- A practice-focused text on the roles, responsibilities, and challenges of working in care.

Glasby, J., & Dickinson, H. (2014). Partnership Working in Health and Social Care: What Is Integrated Care and How Can We Deliver It? Policy Press.

- Covers multi-disciplinary teamwork, collaboration, and service integration.

Adams, R., Dominelli, L., & Payne, M. (2017). Social Work: Themes, Issues and Critical Debates (4th ed.). Palgrave.

- Explores care values, equality, diversity, and ethics in social care practice.

Thompson, N. (2018). The Social Work Companion (3rd ed.). Routledge.

- A comprehensive resource on communication, values, and person-centred care.

Parrott, L. (2014). Values and Ethics in Social Work Practice. Sage.

- Focuses on ethical decision-making, dignity, and professional values in health and social care.

Unit 2: Effect	tive Communication and I	Inform	nation Manager	ment in Care	
Unit Aim	This unit aims to develop learners' knowledge and skills in professional communication within health and social care settings. It explores verbal, non-verbal, and written communication, alongside the importance of active listening, empathy, and adapting communication to diverse needs. The unit also equips learners with an understanding of safe, ethical, and legal information handling practices. Learners will be able to apply effective communication and information management to improve service user experiences and professional practice.				
Level	3	Cred	lit Value	10	
GLH	40	Unit	Number	HS/CIM/105	
Learning Ou	tcomes	Asse	ssment Criteria	a	
The learner	will	The	learner can		
Understand the principles of effective communication in care		 Identify different forms of communication Explain barriers to communication and methods to overcome them. Describe how culture, disability, and personal factors influence communication. 			
Apply professional communication skills in practice			pathy in care interactions. 2.2. Adapt communication methods to meet individual needs		
Understand the principles of information management in care		3.1. 3.2. 3.3.	Explain legal, eth requirements for Describe safe pr storing, and share Evaluate the imp	ical, and organisational rhandling information actices for recording, ing information. ortance of confidentition security in health	

Assessment must be carried out through a range of valid and reliable methods that measure achievement of all learning outcomes. Centres should ensure evidence is authentic, sufficient, and demonstrates learners' ability to apply knowledge in practice.

Assessment Methods

- Practical role-play or observation of communication in simulated scenarios.
- Report on barriers to communication and strategies to overcome them.

• Written assignment on legal/ethical requirements for information handling.

Core Textbooks

Sully, P., & Dallas, J. (2010). Essential Communication Skills for Nursing and Health Professionals. Elsevier.

Moonie, N. (2010). Health and Social Care: Level 3 National Certificate Book I. Heinemann.

Thompson, N. (2018). Effective Communication: A Guide for Health and Social Care. Palgrave.

Supplementary Readings

Silverman, J. et al. (2016). Skills for Communicating with Patients. Radcliffe.

Department of Health and Social Care (2021). Data Protection and Confidentiality in Health and Social Care: Guidance. UK Gov.

Kurtz, S., Draper, J., & Silverman, J. (2016). Teaching and Learning Communication Skills in Medicine. CRC Press.

Gillingham, P. (2016). Decision-Making, Assessment and Risk in Social Work. Policy Press (for information handling and professional judgement).

Unit 3: Person-Centred and Inclusive Care Practices					
Unit Aim	This unit develops learners' understanding of person-centred care and the importance of tailoring support to the needs, choices, and preferences of individuals. It explores how equality, diversity, and inclusion underpin quality practice in health and social care settings. Learners will examine how to promote dignity, respect, and empowerment while preventing discrimination and exclusion. By completing this unit, learners will gain the skills to apply person-centred values in a wide range of care contexts.				
Level	3		it Value	10	
GLH	40	Unit	Number	HS/PIC/106	
Learning Ou	tcomes	Asse	ssment Criteria	ı	
The learner	will	The	learner can		
2. Apply in care	person-centred approaches settings	 I.I. Define the concept of person-centred values I.2. Explain how person-centred approach es underpin professional care practice I.3. Analyse the benefits of applying person-centred values in care delivery. 2.I. Demonstrate how individual needs, preferences, and choices can be reflected in care plans. 2.2. Explain how care can be adapted to meet changing individual needs. 2.3. Evaluate challenges in implementing person-centred approaches and strate 			
3. Promote equality, diversity, and inclusion in care		gies to overcome them. 3.1. Explain the impact of discrimination and exclusion on individuals receiving care. 3.2. Demonstrate inclusive practices that promote dignity, choice, and respect. 3.3. Evaluate the role of legislation and organisational policies in promoting equality and diversity.			

Assessment must be carried out through a range of valid and reliable methods that measure achievement of all learning outcomes. Centres should ensure evidence is authentic, sufficient, and demonstrates learners' ability to apply knowledge in practice.

Assessment Methods

- Case study demonstrating person-centred care planning.
- Reflective journal on promoting dignity, choice, and independence.
- Presentation on equality, diversity, and inclusion in practice.

Core Textbooks

Brooker, D., & Latham, I. (2016). Person-Centred Dementia Care: Making Services Better with the VIPS Framework. Jessica Kingsley.

Moonie, N. (2010). Health and Social Care: Level 3 National Certificate Book 2. Heinemann.

Tew, J. (2011). Social Approaches to Mental Distress. Palgrave Macmillan (for inclusive and person-centred perspectives).

Supplementary Readings

Thompson, N. (2016). Anti-Discriminatory Practice: Equality, Diversity and Social Justice. Palgrave.

Glasby, J. (2017). Understanding Health and Social Care (3rd ed.). Policy Press.

Parrott, L. (2014). Values and Ethics in Social Work Practice. Sage.

Equality and Human Rights Commission (2020). Equality Act 2010: Guidance for Health and Social Care Providers.

Unit 4: Profe	Unit 4: Professional Roles, Responsibilities and Development in Care				
Unit Aim	This unit explores the duties, boundaries, and professional standards required of workers in health and social care. It examines how regulatory frameworks and codes of practice shape professional behaviour and accountability. Learners will consider the importance of reflective practice and continuous professional development (CPD). By the end of the unit, learners will be able to demonstrate awareness of their own professional responsibilities and create plans for career growth.				
Level	3	Cred	lit Value	10	
GLH	40	Unit	Number	HS/PRD/107	
Learning Out	tcomes	Asse	ssment Criteria	1	
The learner	will	The	learner can		
Understand professional roles and boundaries in care		 1.1. Explain the main roles and responsibilities of health and social care practitioners. 1.2. Describe the importance of maintaining professional boundaries in care practice. 1.3. Analyse the potential risks of failing to observe professional boundaries. 			
Understand professional standards and codes of practice		 2.1. Identify the role of regulatory and advisory bodies in health and social care 2.2. Explain the significance of agreed ways of working and codes of conduct. 2.3. Evaluate how compliance with professional standards supports quality and safety in care. 		health and social care ficance of agreed ways codes of conduct. mpliance with professupports quality and	
3. Engage develop	in personal and professional oment	3.1. 3.2. 3.3.	practice in profesors. Assess the value progression in he Create a personate	rtance of reflective ssional learning. of CPD for career ealth and social care. al development plan to so and future goals.	

Assessment must be carried out through a range of valid and reliable methods that measure achievement of all learning outcomes. Centres should ensure evidence is authentic, sufficient, and demonstrates learners' ability to apply knowledge in practice.

Assessment Methods

- Written assignment on roles, boundaries, and professional standards.
- Development of a Personal Development Plan (PDP).
- Reflective account on CPD and professional growth.

Core Textbooks

Thompson, N., & Thompson, S. (2018). The Social Work Companion (3rd ed.). Routledge.

Jasper, M. (2013). Beginning Reflective Practice. Nelson Thornes.

Sully, P. (2010). Essential Skills Clusters for Nurses. Elsevier (sections on professional responsibility).

Supplementary Readings

Fook, J., & Gardner, F. (2013). Critical Reflection in Context: Applications in Health and Social Care. Routledge.

NHS Leadership Academy (2016). Healthcare Leadership Model: The Nine Dimensions of Leadership Behaviour.

Adams, R., Dominelli, L., & Payne, M. (2017). Social Work: Themes, Issues and Critical Debates (4th ed.). Palgrave.

Care Quality Commission (CQC). (2021). Guidance for Providers on Meeting the Regulations.

Linit E. Duin	sinles Values and Basulate	·w. Eva	manuaules in Ce			
	ciples, Values and Regulato					
Unit Aim	This unit introduces learners to the ethical principles, care values, and legal frameworks that underpin safe and effective practice in health and social care. It explores how dignity, rights, and independence are protected and promoted in professional practice. Learners will examine key legislation, regulatory standards, and organisational policies that shape service delivery. By completing this unit, learners will be able to apply legal and ethical principles in real care contexts and reflect on their role in safeguarding standards.					
Level	3	Credi	it V alue	10		
GLH	40	Unit	Number	HS/PVR/108		
Learning O	utcomes	Asses	sment Criteria	a		
The learner	will	The I	earner can			
2. Under	rstand the principles and val- inderpinning care rstand regulatory and legal works for care practice	1.2. 1.3. 2.1. 2.2. 2.3.	rights, choice, ar care practice. Describe how edinclusion shape the and social care. Analyse the role (e.g., beneficence tice, autonomy) sions. Identify key legishealth and social Explain the role monitoring and in Evaluate the impolicies and product of the state of the sta	of regulatory bodies in improving care quality. fact of organisational cedures on profession-		
3. Apply principles and frameworks to care delivery		 3.1. Demonstrate how legislation and professional standards guide daily care practice. 3.2. Evaluate the importance of ethical decision-making in resolving dilemmas in health and social care. 3.3. Reflect on the practitioner's responsibility in upholding care values and reglatory requirements. 		ds guide daily care ortance of ethical de- resolving dilemmas in care. ractitioner's responsi- g care values and regu-		

Assessment must be carried out through a range of valid and reliable methods that measure achievement of all learning outcomes. Centres should ensure evidence is

authentic, sufficient, and demonstrates learners' ability to apply knowledge in practice.

Assessment Methods

- Essay on ethical principles and care values.
- Case study exploring the application of legislation and regulation.
- Report evaluating the importance of ethical decision-making.

Core Textbooks

Sully, P., & Dallas, J. (2010). Essential Communication Skills for Nursing and Health Professionals. Elsevier.

Moonie, N. (2010). Health and Social Care: Level 3 National Certificate, Book 2. Heinemann. Glasby, J. (2017). Understanding Health and Social Care (3rd ed.). Policy Press.

Supplementary Readings

Parrott, L. (2014). Values and Ethics in Social Work Practice. Sage.

Banks, S. (2020). Ethics and Values in Social Work (5th ed.). Red Globe Press.

Care Quality Commission (CQC). (2021). Fundamental Standards: Guidance for Providers.

Department of Health and Social Care (2022). Statutory Guidance on the Care Act 2014.

Unit 6: Healt	h, Safety, Safeguarding ar	nd Wellbeing in Care Settings				
Unit Aim	This unit equips learners with knowledge and skills to promote health and safety, protect individuals through safeguarding, and enhance wellbeing in health and social care environments. It explores the identification and management of risks, legal and organisational responsibilities, and procedures for safeguarding vulnerable individuals. Learners will also examine approaches to promoting physical and mental wellbeing, alongside sustainable practices in care settings. By completing this unit, learners will be able to apply safe, ethical, and sustainable practices that protect both service users and staff.					
Level	3	Credit Value 10				
GLH	40	Unit Number HS/HSW/109				
Learning Ou	tcomes	Assessment Criteria				
The learner	will	The learner can				
sponsib	tand health and safety re- ilities in care settings afeguarding principles in actice	 I.I. Identify common hazards and risks in health and social care environments. I.2. Explain the responsibilities of employers and employees under health and safety legislation I.3. Describe strategies for maintaining a safe and healthy workplace. 2.1. Define safeguarding and outline different types of abuse (physical, emotional, sexual, financial, neglect) 2.2. Explain organisational and legal procedures for reporting safeguarding concerns. 2.3. Evaluate the role of care workers in recognising and responding to safeguarding issues. 				
	te wellbeing and sustainable es in care	 3.1. Explain strategies for promoting physical, emotional, and mental wellbeing of individuals in care. 3.2. Describe the importance of creating supportive and empowering environments. 3.3. Evaluate sustainable practices that support long-term health and social care delivery 				

Assessment must be carried out through a range of valid and reliable methods that measure achievement of all learning outcomes. Centres should ensure evidence is authentic, sufficient, and demonstrates learners' ability to apply knowledge in practice.

Assessment Methods

- Observation or simulation of risk assessment.
- Written assignment on safeguarding principles and reporting procedures.
- Case study analysing strategies to promote wellbeing and sustainability.

Core Textbooks

Moonie, N. (2010). Health and Social Care: Level 3 National Certificate, Book 2. Heinemann.

Thompson, N. (2018). Promoting Equality: Working with Diversity and Difference. Palgrave.

Linsley, P., Kane, R., & Owen, S. (2011). Nursing for Public Health: Promotion, Principles and Practice. Oxford University Press.

Supplementary Readings

Department of Health and Social Care (2018, updated 2022). Working Together to Safeguard Children: Statutory Guidance.

Care Quality Commission (CQC) (2021). Safeguarding Adults Protocol.

Tanner, D. (2010). Safeguarding Adults in Social Work. Learning Matters.

World Health Organization (2020). Promoting Mental Health: Concepts, Emerging Evidence and Practice.

Unit 7: Promoting Health and Wellbeing in Communities					
Unit Aim	This unit explores the principles and practice of health promotion within health and social care. Learners will examine the factors that influence health outcomes, such as lifestyle, environment, and socio-economic conditions. The unit develops knowledge of strategies, campaigns, and community-based approaches to improving public health. By the end, learners will be able to apply health promotion methods to support individuals and groups in making positive health choices.				
Level	3	Credit	Value	10	
GLH	40	Unit N	umber	HS/PHW/110	
Learning Ou	tcomes	Assessi	ment Criteria		
The learner	will	The lea	arner can		
cepts and cepts are cepts and cepts and cepts and cepts are cepts and cepts and cepts are cepts are cepts are cepts and cepts are cepts	tand health promotion connid principles e approaches and methods h promotion	its purpose in improving population health. 1.2. Describe key models of health promotion 1.3. Analyse the factors that influence health outcomes		proving population odels of health promo- ors that influence unity-based strategies ealth and wellbeing.	
2 Alub-alth-marking in angelia		2.2. Explain the role of national and local health campaigns in influencing behaviour.2.3. Evaluate the effectiveness of different methods used in health promotion.		ctiveness of different health promotion.	
з. Арріу r	ealth promotion in practice	3.2. D to 3.3. Re	vity addressing a Demonstrate con Dencourage hea	fectiveness of a health	

Assessment must be carried out through a range of valid and reliable methods that measure achievement of all learning outcomes. Centres should ensure evidence is authentic, sufficient, and demonstrates learners' ability to apply knowledge in practice.

Assessment Methods

- Design and present a simple health promotion campaign or activity.
- Report evaluating the effectiveness of national/local health campaigns.
- Reflective journal on communication strategies in promoting health.

Core Textbooks

Naidoo, J., & Wills, J. (2016). Foundations for Health Promotion (4th ed.). Elsevier.

Scriven, A. (2017). Promoting Health: A Practical Guide (7th ed.). Elsevier.

Linsley, P., Kane, R., & Owen, S. (2011). Nursing for Public Health: Promotion, Principles and Practice. Oxford University Press.

Supplementary Readings

Tones, K., Robinson, Y., & Tilford, S. (2013). Health Promotion: Effectiveness, Efficiency and Equity (3rd ed.). Nelson Thornes.

World Health Organization (2016). Ottawa Charter for Health Promotion – 30 Years of Impact. WHO.

Public Health England (2020). Health Matters: Guidance for Public Health Practice.

Green, J., & Tones, K. (2010). Health Promotion: Planning and Strategies (2nd ed.). Sage.

Unit 8: Nutrition and Healthy Living in Health and Social Care				
Unit Aim	This unit provides learners with knowledge of the role of nutrition and hydration in promoting health and wellbeing. It explores dietary needs across life stages, the impact of poor nutrition, and the importance of cultural and religious considerations in food choices. Learners will also examine the promotion of healthy eating and the management of special dietary requirements in care settings. By completing this unit, learners will gain practical skills in supporting individuals to maintain healthy lifestyles.			
Level	3	Cred	it Value	10
GLH	40	Unit	Number	HS/NHL/III
Learning Out	tcomes	Asse	ssment Criteria	1
The learner	will	The	learner can	
tion and	2.2. Describe the impact of lifestyle, cul-		ng health. in food groups and s associated with poor ation. al requirements for and older people.	
			2.3. Evaluate the consequences of not meeting dietary needs at different life stages.	
Support healthy eating in care practice		3.1. Identify special diets relevant to health conditions (e.g., diabetes, coeliac, aller gies).3.2. Demonstrate how to promote healthy		
		3.3.	eating and hydra Reflect on the ro	tion in a care setting. ble of care workers in ve lifestyle choices.

Assessment must be carried out through a range of valid and reliable methods that measure achievement of all learning outcomes. Centres should ensure evidence is authentic, sufficient, and demonstrates learners' ability to apply knowledge in practice.

Assessment Methods

- Learners will be assessed through written assignments and case studies exploring nutritional needs across life stages.
- A reflective account or short presentation will evidence understanding of cultural,

lifestyle, and medical influences on diet.

Core Texts

Whitney, E., & Rolfes, S. R. (2018). *Understanding Nutrition* (15th ed.). Cengage. Geissler, C., & Powers, H. (2017). *Human Nutrition* (13th ed.). Oxford University Press. BNF (British Nutrition Foundation). (2021). *Nutrition and Health Guidelines*.

Supplementary Readings

Public Health England (2020). The Eatwell Guide.

NHS England (2021). Obesity and Healthy Living Policy Guidance.

World Health Organization (2018). Healthy Diet Fact Sheet.

Unit 9: Unde	Unit 9: Understanding Dementia and Supportive Care					
Unit Aim	This unit provides learners with an understanding of dementia, including its types, causes, and progression. It examines the impact dementia has on individuals, families, and carers, and highlights the importance of communication and supportive strategies. Learners will explore personcentred approaches to dementia care that uphold dignity, independence, and respect. By the end, learners will be able to apply inclusive practices to improve quality of life and wellbeing for those living with dementia.					
Level	3	Credit Value		10		
GLH	40	Unit Number	•	HS/DSC/112		
Learning Ou	tcomes	Assessment C	Criteria	a		
The learner	will	The learner o	an			
2. Apply prin demo	person-centred approaches entia care	types (e.g body, fro l.2. Explain h communi l.3. Analyse t dividuals, 2.1. Demonst gies appr dementia 2.2. Explain h independ 2.3. Evaluate person-c suggest s	g., Alzhe ontotem ow den ication, the impa familie trate co opriate tow to a lence, d challeng entred trategie	nentia affects memory, and behaviour. act of dementia on ins, and carers. In munication stratefor individuals with adapt care to support ignity, and inclusion. It is in implementing dementia care and its to address them.		
3. Promo	te wellbeing for individuals ementia	that enha 3.2. Explain all tress, and iour. 3.3. Reflect of	ince qua pproach kiety, an	es and interventions ality of life. nes to reducing dis- nd challenging behav- ole of carers in pro- g and preventing isola-		

Assessment must be carried out through a range of valid and reliable methods that measure achievement of all learning outcomes. Centres should ensure evidence is authentic, sufficient, and demonstrates learners' ability to apply knowledge in practice.

Assessment Methods

• Case study on the effects of dementia on individuals and families.

- Role-play demonstrating adapted communication for dementia care.
- Reflective account on promoting dignity and wellbeing for individuals with dementia.

Core Textbooks

Brooker, D., & Latham, I. (2016). Person-Centred Dementia Care: Making Services Better with the VIPS Framework. Jessica Kingsley.

Downs, M., & Bowers, B. (2014). Excellence in Dementia Care: Research into Practice (2nd ed.). Open University Press.

Innes, A., Kelly, F., & McCabe, L. (2012). Key Issues in Evolving Dementia Care: International Theory-Based Policy and Practice. Jessica Kingsley.

Supplementary Readings

Kitwood, T. (1997). Dementia Reconsidered: The Person Comes First. Open University Press.

Alzheimer's Society (2021). Dementia-Friendly Care: Guidance for Practitioners.

World Health Organization (2019). Global Action Plan on the Public Health Response to Dementia 2017–2025.

NHS England (2020). The Well Pathway for Dementia: National Guidance.

Unit 10: Str	Unit 10: Stroke Awareness and Recovery Support					
Unit Aim	This unit provides learners with knowledge of strokes, including causes, symptoms, and effects on individuals. It examines emergency response procedures and the importance of early recognition and treatment. Learners will also explore rehabilitation strategies and ways to provide supportive care that promotes recovery and independence. By completing this unit, learners will gain the skills to respond appropriately to stroke emergencies and contribute to long-term recover support.					
Level	3		lit Value	10		
GLH	40	Unit	Number	HS/SAR/113		
Learning O	utcomes	Asse	ssment Criteria	a e		
The learner	will	The	learner can			
2. Under and re	estand emergency recognition esponse	I.I. Define stroke and identify its main causes and risk factors. I.2. Explain the physical, cognitive, and emotional effects of a stroke. I.3. Analyse the short- and long-term impacts of stroke on individuals and families.				
	rt recovery and rehabilita- fter stroke	3.1. 3.2. 3.3.	in health and soc therapy, occupat therapy). Demonstrate sup promote indeper skills. Reflect on the im	itation strategies used cial care (e.g., physio- cional therapy, speech pportive practices that indence and daily living apportance of emotional ort in stroke recovery.		

Assessment must be carried out through a range of valid and reliable methods that measure achievement of all learning outcomes. Centres should ensure evidence is authentic, sufficient, and demonstrates learners' ability to apply knowledge in practice.

Assessment Methods

- Written assignment on causes, symptoms, and effects of stroke.
- Scenario-based task on emergency recognition and FAST response.
- Case study exploring rehabilitation strategies and daily living support.

Core Textbooks

Duncan, P. W., & Zorowitz, R. D. (2016). Stroke Rehabilitation: A Function-Based Approach (4th ed.). Elsevier.

Langhorne, P., Bernhardt, J., & Kwakkel, G. (2011). Stroke Rehabilitation: Evidence-Based Practice. Wiley-Blackwell.

Young, J., & Forster, A. (2010). Stroke Rehabilitation: Clinical Case Studies. Oxford University Press.

Supplementary Readings

National Institute for Health and Care Excellence (NICE) (2023). Stroke and Transient Ischaemic Attack in Over 16s: Diagnosis and Initial Management.

Royal College of Physicians (2022). National Clinical Guideline for Stroke.

World Health Organization (2019). WHO Global Stroke Guidelines and Action Plan.

Stroke Association (2021). Rebuilding Lives After Stroke: Practical Guidance for Carers.

Unit II: Diabetes Awareness and Care Management				
Unit Aim	This unit introduces learners to diabetes, its types, causes, and complications. It examines lifestyle, dietary, and medical approaches to diabetes management. Learners will explore the role of health and social care workers in supporting individuals to live well with diabetes and prevent further complications. By completing this unit, learners will gain the knowledge and skills needed to promote effective diabetes care and self-management.			
Level	3	Credit Value	10	
GLH	40	Unit Number	HS/DAC/114	
Learning Outcomes		Assessment Criteria		
The learner will		The learner can		
Understand diabetes and its types 2. Understand approaches to managing diabetes		 I.I. Define Type I, Type 2, and gestational diabetes. I.2. Explain symptoms, risk factors, and potential complications. I.3. Analyse the impact of diabetes on individuals, families, and health services. 2.1. Describe lifestyle approaches to managing diabetes 2.2. Explain medical treatments for diabetes 2.3. Evaluate the importance of integrated care in supporting diabetes management. 		
3. Support individuals living with diabetes		needs of individu 3.2. Explain the role supporting self-n pendence. 3.3. Reflect on strate	Demonstrate awareness of daily care needs of individuals with diabetes. Explain the role of care workers in supporting self-management and independence. Reflect on strategies for preventing complications and promoting long-term	

Assessment must be carried out through a range of valid and reliable methods that measure achievement of all learning outcomes. Centres should ensure evidence is authentic, sufficient, and demonstrates learners' ability to apply knowledge in practice.

Assessment Methods

- Report on the differences between Type 1, Type 2, and gestational diabetes.
- Case study analysing lifestyle and medical management strategies.
- Reflective account on supporting self-management and independence.

Core Textbooks

Colberg, S. R. (2019). Exercise and Diabetes: A Clinical Guide. Springer.

Poretsky, L. (2010). Principles of Diabetes Mellitus (2nd ed.). Springer.

Pickup, J. C., & Williams, G. (2017). Textbook of Diabetes (5th ed.). Wiley-Blackwell.

Supplementary Readings

NICE (2022). Type I and Type 2 Diabetes in Adults: Management Guidelines.

World Health Organization (2021). Global Diabetes Compact: A Call to Action.

Diabetes UK (2020). Improving Care for People with Diabetes: Practice Guidance for Health Professionals.

Skyler, J. S. (2017). Atlas of Diabetes (5th ed.). Springer.

Unit 12: End-of-Life and Palliative Care					
Unit Aim	This unit introduces learners to the principles and practices of end-of-life and palliative care. It explores the physical, emotional, spiritual, and cultural needs of individuals and their families during the final stages of life. Learners will develop skills in sensitive communication, promoting dignity, and providing compassionate support. By completing this unit, learners will understand their role in ensuring respectful, person-centred end-of-life care.				
Level	3	Credit Value	10		
GLH	40	Unit Number	HS/EPC/115		
Learning Outcomes		Assessment Criteria			
The learner will		The learner can			
Understand the principles of end- of-life and palliative care Understand the needs of individuals and families at the end of life		 1.1. Define end-of-life and palliative care and explain their purposes. 1.2. Describe the principles of dignity, choice, and respect in end-of-life care. 1.3. Analyse the difference between palliative care and curative treatment. 2.1. Explain the emotional, cultural, and spiritual needs of individuals at the end of life. 2.2. Describe how to support families and carers during bereavement. 2.3. Evaluate the challenges in meeting diverse end-of-life needs. 			
3. Apply supportive practices in end- of-life care		 3.1. Demonstrate effective communication skills in sensitive situations. 3.2. Explain approaches to managing comfort, pain, and anxiety 3.3. Reflect on the role of care workers in providing compassionate and ethical end-of-life care. 			

Assessment must be carried out through a range of valid and reliable methods that measure achievement of all learning outcomes. Centres should ensure evidence is authentic, sufficient, and demonstrates learners' ability to apply knowledge in practice.

Assessment Methods

- Case study exploring cultural, spiritual, and emotional needs at end of life.
- Reflective account on dignity, respect, and communication in sensitive situations.
- Report on the difference between palliative and curative care, including pain and comfort management approaches.

Core Texts

Dickman, A., Schneider, J., & Varga, J. (2017). The Oxford Handbook of Palliative Care (2nd ed.). Oxford University Press.

Faull, C., De Caestecker, S., Nicholson, A., & Black, F. (2022). *Handbook of Palliative Care* (3rd ed.). Wiley-Blackwell.

Lloyd-Williams, M. (2008). Psychosocial Issues in Palliative Care. Oxford University Press.

Supplementary Readings

NHS England (2021). Ambitions for Palliative and End-of-Life Care: A National Framework.

World Health Organization (2018). Integrating Palliative Care and Symptom Relief into Primary Health Care.

Hospice UK (2020). Standards of Care in Palliative Services.

Version Control and Review Information

EBMA is committed to maintaining the accuracy and relevance of its qualifications. This specification will be reviewed regularly to ensure its best practice in the sector.

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Review Arrangements

- This document is subject to periodic review by EBMA.
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