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| Unit Title: Installation, maintenance and removal of assistive technology in social care | | |
| URN: H/506/8164 |  |  |
| Credit Value: 2 |  |  |
| Level: 3 |  |  |

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|  | **Assessment Method** | **Evidence Ref.**  **Page number, Method** | **Assessor Decision**  **Sign and Date** |
| **You must be able to:** | | | |
| **1 Understand the implications for individuals and others of assistive technology installation** | | | |
| 1.1 Explain the impact of installing assistive technology on:  •an individual  •others |  |  |  |
| 1.2 Explain policies and procedures for safety in relation to assistive technology when working in an individual's own home including:  •safeguarding  •infection prevention  •fire risk  •risk assessment |  |  |  |
| **2 Be able to install assistive technology** | | | |
| 2.1 Support an individual and carers to understand the purpose of installing assistive technology |  |  |  |
| 2.2 Work in partnership with an individual and others to ascertain location for assistive technology devices |  |  |  |
| 2.3 Complete safety and operational checks for assistive technology and any linked services |  |  |  |
| 2.4 Carry out installation of assistive technology with regard to the individual's needs and choices |  |  |  |

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|  | **Assessment Method** | **Evidence Ref.**  **Page number, Method** | **Assessor Decision**  **Sign and Date** |
| 2.5 Ensure operability of assistive technology |  |  |  |
| 2.6 Support an individual and others to understand instructions on safe use |  |  |  |
| 2.7 Discuss service agreements with an individual and others |  |  |  |
| **3 Be able to support an individual and others to maintain assistive technology** | | | |
| 3.1 Provide an individual and others with information on the maintenance of assistive technology |  |  |  |
| 3.2 Ensure an individual and others are aware of support available if assistive technology becomes inoperable including:  •procedure  •contact details  •associated cost |  |  |  |
| **4 Be able to support an individual and others to remove assistive technology** | | | |
| 4.1 Provide information to an individual and others on removal and disposal of assistive technology after use |  |  |  |
| 4.2 Support an individual and others to carry out removal of assistive technology in accordance with agreed ways of working including:  •cleaning  •storage  •recycling  •disposal |  |  |  |

**Learner declaration of authenticity:**

I declare that the work presented for this unit is entirely my own work.

Learner signature: Date:

**Assessor sign off of completed unit:**

I confirm that the learner has met the requirements for all assessment criteria demonstrating knowledge and skills for this unit.

Assessor name:

Signature: Date: