



### Why is the study of Health and Social Care important?

About 3 million people work in health and social care. Health care roles include doctors, pharmacists, nurses, midwives and healthcare assistants, while social care roles include care assistants, occupational therapists, counsellors and administrators. Together, they account for nearly one in ten of all paid jobs in the UK. Demand for both health and social care is likely to rise, so they will continue to play a key role in UK society and the demand for people to carry out these vital roles will increase. Study of this sector at Key Stage 4 will complement GCSE study through providing an opportunity for practical application alongside conceptual study. There are also strong opportunities for post-16 progression in this important sector.

You will develop key skills, such as research, report drafting and writing skills and project management. The qualification is 120 GLH, which is the same size and level as a GCSE and is aimed at everyone who wants to find out more about Health and Social Care.

You will study the following three mandatory components, covering the underpinning knowledge and practical skills required to work in Health and Social Care:

- 1 Human Lifespan Development
- 2 Health and Social Care Services and Values
- 3 Health and Wellbeing

### How does your study of Health and Social Care support your study in other subjects?

This qualification is designed to be taken as part of a broad and balanced curriculum at Key Stage 4. It can be complementary learning for a wide range of subjects. You can take this qualification alongside GCSEs in EBacc subjects, English and other languages, as well as two non-core GCSEs and or other Key Stage 4 vocational qualifications.

### How are you assessed during Key Stage 4 in Health and Social Care?

The three components in the qualification give you the opportunity to develop broad knowledge and understanding of health and social care at Levels 1 and 2.

Internal assessment Components 1 and 2 are assessed through internal assessment. Internal assessment for these components has been designed to allow the application of the conceptual underpinning for the sector through realistic tasks and activities. This style of assessment promotes deep learning through ensuring the connection between knowledge and practice.

The components focus on:

- the development of core knowledge and understanding of human growth and development, how people deal with major life events, health and social care services
- the development and application of skills such as: practical demonstration of care values, together with the ability to reflect on own performance
- reflective practice through the development of skills and techniques that allow students to respond to feedback and identify areas for improvement using relevant presentation techniques.

There is one external assessment, Component 3. It provides the main synoptic assessment for the qualification. Component 3 builds directly on Components 1 and 2, and enables learning to be brought together and related to a real-life situation. Component 3: Health and Wellbeing requires students to apply performance skills and techniques in response to a brief and stimulus. The external assessment takes the form of an external assessment taken under supervised conditions, which is then marked and a grade awarded by the exam board. Students are allowed to resit the external assessment once during their study period. The external assessment comprises 40 per cent of the total grade. This component will be delivered and assessed towards the end of the course.

## How are you assessed during Key Stage 4 in Health and Social Care?

Study of the qualification as part of Key Stage 4 learning will help you to make more informed choices for further learning, either generally or in this sector. The choices that you can make post-16 will depend on your overall level of attainment and their performance in the qualification.

Students who generally achieve at Level 2 across their Key Stage 4 learning might consider progression to:

- A Levels as preparation for entry to higher education in a range of subjects
- study of a vocational qualification at Level 3, such as a BTEC National in Health and Social Care, which prepares you to enter employment or apprenticeships, or to move on to higher education by studying a degree in aspects of health or social care.

Students who generally achieve at Level 1 across their Key Stage 4 learning might consider progression to:

- study at Level 2 post-16 in a range of technical routes designed to lead to work, to progression to employment, to apprenticeships or to further study at Level 3. For these students, the attitudes and the reflective and communication skills covered in this qualification will help them achieve
- study of health and social care post-16 through the study of a Technical Certificate. Students who perform strongly in this qualification compared to their overall performance should strongly consider this progression route as it can lead ultimately to employment in the health or social care sector.

You may wish to build on an interest in human growth and development but take it in a different direction (at either Level 2 or Level 3) by studying for qualifications in Early Years education.

## Pearson BTEC Level 1/2 Tech Award in Health and Social Care Course Overview

All students will participate weekly in 3 hours of lessons and will be provided with an effort grade during the 6 assessment windows.  
Those students opting for an exam subject within Health and Social Care will be assessed through the criteria outlined below.

Unit description	Content	Content detail
<p>How does the course work?</p> <p><b>Component 1 – Human Lifespan Development</b></p> <p>In this unit you will:</p> <p>A Understand human growth and development across life stages and the factors that affect it</p> <p>B Investigate how individuals deal with life events</p>	<p>Internally assessed Mandatory component = 30% of the total course:</p> <p>In this component, students will study how people grow and develop over the course of their life, from infancy to old age, this includes physical, intellectual, emotional and social development, and the different factors that may affect them.</p> <p>An individual's development can be affected by major life events, such as marriage, parenthood or moving house, and students will learn about how people adapt to these changes, as well as the types and sources of support that can help them.</p> <p>Students will develop transferable skills, such as written communication skills, which will support progression to Level 2 or 3 vocational or academic qualifications.</p>	<p><b>A1 Human growth and development across life stages</b> Main life stages: infants (birth to 2 years), early childhood (3–8 years) adolescence (9–18 years), early adulthood (19–45 years), middle adulthood (46–65 years), later adulthood (65+ years).</p> <p>PIES growth and development in the main life stages: physical growth and development across the life stages, including gross and fine motor skills, growth patterns, primary and secondary sexual characteristics, menopause, loss of mobility, muscle tone/strength and skin elasticity intellectual/cognitive development across the life stages, including language development, problem solving, abstract and creative thinking, development/loss of memory and recall emotional development across the life stages, including bonding and attachment, independence and self-esteem, security, contentment, self-image social development across the life stages, including the formation of relationships with others and the socialisation process.</p> <p><b>A2 Factors affecting growth and development</b> Physical factors, to include: genetic inheritance, experience of illness and disease, diet and lifestyle choices, appearance. Social and cultural factors, to include: culture, e.g. community involvement, religion, gender roles and expectations, educational experiences, the influence of role models, the influence of social isolation, personal relationships with friends and family. Economic factors, to include: income/wealth, material possessions</p> <p><b>B1 Different types of life events</b> Physical events, to include: accident/injury, ill health. Relationship changes, to include: entering into relationships, marriage, divorce, parenthood, bereavement. Life circumstances, to include: moving house, school or job, exclusion from education, redundancy, imprisonment, retirement.</p> <p><b>B2 Coping with change caused by life events</b> How individuals adapt to these changes. Sources of support: family, friends, partners, professional carers and services, community groups, voluntary and faith-based organisations. Types of support: emotional, information and advice, practical help, including financial assistance, childcare, transport</p>

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Unit description	Content	Content detail
<p><b>Component 2 – Health and Social Care Services and Values</b></p> <p>In this unit you will:</p> <p>A Understand the different types of health and social care services and barriers to accessing them</p> <p>B Demonstrate care values and review own practice.</p>	<p>Internally assessed Mandatory component = 30% of the total course:</p> <p>In this component you will be providing good health and social care and a set of 'care values' exists to ensure that this happens. Care values are important because they enable people who use health and social care services to get the care they need and to be protected from different sorts of harm. This component will give you an understanding of health and social care services and will help you develop skills in applying care values that are common across the sector and some of which are transferable to other sectors that involve interactions with clients or customers.</p>	<p><b>A1 Health and social care services</b></p> <p>Different health care services and how they meet service user needs: primary care, e.g. GPs, dental care, optometry, community health care, secondary and tertiary care, e.g. specialist medical care, allied health professionals, e.g. physiotherapy, occupational therapy, speech and language therapy, dieticians.</p> <p>Different social care services and how they meet service user needs: services for children and young people, e.g. foster care, residential care, youth work, services for adults or children with specific needs (learning disabilities, sensory impairments, long-term health issues), e.g. residential care, respite care, domiciliary care, services for older adults, e.g. residential care, domiciliary care, the role of informal social care provided by relatives, friends and neighbours.</p> <p><b>A2 Barriers to accessing services</b></p> <p>Types of barrier and how they can be overcome by the service providers or users: physical barriers, e.g. issues getting into and around the facilities, sensory barriers, e.g. hearing and visual difficulties, social, cultural and psychological barriers, e.g. lack of awareness, differing cultural beliefs, social stigma, fear of loss of independence, language barriers, e.g. differing first language, language impairments, geographical barriers, e.g. distance of service provider, poor transport links, intellectual barriers, e.g. learning difficulties, resource barriers for service provider, e.g. staff shortages, lack of local funding, high local demand, financial barriers, e.g. charging for services, cost of transport, loss of income while accessing services.</p> <p><b>B1 Care values</b></p> <p>Care values: empowering and promoting independence by involving individuals, where possible, in making choices, e.g. about treatments they receive or about how care is delivered, respect for the individual by respecting service users' needs, beliefs and identity, maintaining confidentiality (when dealing with records, avoiding sharing information inappropriately, e.g. gossip), preserving the dignity of individuals to help them maintain privacy and self-respect, effective communication that displays empathy and warmth, safeguarding and duty of care, e.g. maintaining a healthy and safe environment, keeping individuals safe from physical harm, promoting anti-discriminatory practice by being aware of types of unfair discrimination and avoiding discriminatory behaviour.</p> <p><b>B2 Reviewing own application of care values</b></p> <p>Key aspects of a review: identifying own strengths and areas for improvement against the care values, receiving feedback from teacher or service user about own performance, responding to feedback and identifying ways to improve own performance.</p>

Unit description	Content	Content detail
<p><b>Component 3 – Health and Wellbeing</b></p> <p>In this unit you will:</p> <p>AO1 Demonstrate knowledge and understanding of factors that affect health and wellbeing</p> <p>AO2 Interpret health indicators</p> <p>AO3 Design a person-centred health and wellbeing improvement plan</p> <p>AO4 Demonstrate knowledge and understanding of how to overcome obstacles relating to health and wellbeing improvement plans</p>	<p>Externally assessed Mandatory component = 40% of the total course:</p> <p>In this component students will:</p> <p>AO1 Demonstrate knowledge and understanding of factors that affect health and wellbeing</p> <p>AO2 Interpret health indicators</p> <p>AO3 Design a person-centred health and wellbeing improvement plan</p> <p>AO4 Demonstrate knowledge and understanding of how to overcome obstacles relating to health and wellbeing improvement plans</p>	<p><b>A1 Factors affecting health and wellbeing</b></p> <p>Definition of health and wellbeing: a combination of physical health and social and emotional wellbeing, and not just the absence of disease or illness.</p> <p>Physical and lifestyle factors that can have positive or negative effects on health and wellbeing: genetic inheritance, including inherited conditions and predisposition to other conditions, ill health (acute and chronic), diet (balance, quality and amount), amount of exercise substance use, including alcohol, nicotine, illegal drugs and misuse of prescribed drugs, personal hygiene.</p> <p>Social, emotional and cultural factors that can have positive or negative effects on health and wellbeing: social interactions, e.g. supportive/unsupportive relationships, social integration/isolation stress, e.g. work-related, willingness to seek help or access services, e.g. influenced by culture, gender, education.</p> <p>Economic factors that can have positive or negative effects on health and wellbeing: financial resources.</p> <p>Environmental factors that can have positive or negative effects on health and wellbeing: environmental conditions, e.g. levels of pollution, noise, housing, e.g. conditions, location.</p> <p>The impact of life events relating to relationship changes and changes in life circumstances</p> <p><b>B1 Physiological indicators</b></p> <p>Physiological indicators that are used to measure health: pulse (resting and recovery rate after exercise), blood pressure, peak flow body mass index (BMI).</p> <p>Using published guidance to interpret data relating to these physiological indicators.</p> <p>The potential significance of abnormal readings: risks to physical health.</p> <p><b>B2 Lifestyle indicators</b></p> <p>Interpretation of lifestyle data, specifically risks to physical health associated with: smoking, alcohol consumption, inactive lifestyles.</p> <p><b>C1 Health and wellbeing improvement plans</b></p> <p>The importance of a person-centred approach that takes into account an individual's needs, wishes and circumstances. Information to be included in plan: recommended actions to improve health and wellbeing, short-term (less than six months) and long-term targets appropriate sources of support (formal and/or informal).</p> <p><b>C2 Obstacles to implementing plans</b></p> <p>Potential obstacles: emotional/psychological – lack of motivation, low self-esteem, acceptance of current state, time constraints – work and family commitments, availability of resources – financial, physical, e.g. equipment, unachievable targets – unachievable for the individual or unrealistic timescale, lack of support, e.g. from family and friends, other factors specific to individual – ability/disability, addiction, barriers to accessing identified services.</p>