Version 2
This version confirms that there will be no further January assessments.

GCE
Examinations from 2009
First AS Award: Summer 2009
First A Level Award: Summer 2010

Health & Social Care
(Single & Double Award)
# Contents

WJEC GCE Health and Social Care  
(Single and Double Award)  
For first teaching from September 2008

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### Subject/Option Entry Codes

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### Qualification Accreditation Numbers

**Advanced Subsidiary:** 500/4814/4 (Single Award); 500/4868/5 (Double Award)

**Advanced:** 500/4867/3 (Single Award); 500/3615/4 (Double Award)
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<td>3. Child Development: Principles and Theories of Growth and Development (0-8 years)</td>
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<td>Optional (Either 3 or 4) [30%]</td>
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HEALTH AND SOCIAL CARE

1 INTRODUCTION

1.1 Qualifications Available

The diagram indicates the relationship between the awards in this suite of Health and Social Care qualifications.

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<thead>
<tr>
<th>Single Award</th>
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<td>Four AS Units</td>
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<tr>
<td>Two A2 Units</td>
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1.2 Criteria for Advanced Subsidiary and Advanced GCE

This specification has been designed to meet the general criteria for GCE Advanced Subsidiary (AS) and Advanced (A) and the subject criteria for AS/A Health and Social Care as issued by DELLS/QCA [2004]. The qualifications will comply with the grading, awarding and certification requirements of the Code of Practice for 'general' qualifications (including GCE).

The AS Single Award qualification will be reported on a five-grade scale; A, B, C, D, and E.

The A Level Single Award qualification will be reported on a six-grade scale of A*, A, B, C, D, and E. The AS Double Award qualification are to be reported on a nine-grade scale, AA, AB, BB, BC, CC, CD, DD, DE, EE.

The A Level Double Award qualification will be reported on an eleven-grade scale; A*A*, A*A, AA, AB, BB, BC, CC, CD, DD, DE, EE.

Candidates who fail to reach the minimum standard for grade E are recorded as U (unclassified), and do not receive a certificate. The skills, knowledge and understanding required for the first half of an A level course are contained in the AS units. The level of demand of the AS examination is that expected of candidates halfway through a full A level course. The skills, knowledge and understanding required for the second half of an A level course are contained in the A2 units. The level of performance expected reflects the more demanding A2 material, including the higher level concepts and a requirement to draw together knowledge and skills from across the course.
The AS assessment units will have equal weighting with the second half of the qualification (A2) when these are aggregated to produce the A level award.

Assessment units may be retaken prior to certification for the AS or A Level qualifications, in which case the better result, will be used for the qualification award. Individual unit results, prior to certification for a qualification, have a shelf life limited only by the shelf life of the specification.

The specification and assessment materials are available in English and Welsh.

1.3 Guided Learning Hours

The guided learning hours for the two-unit AS GCE (Single Award) are 180. The guided learning hours for the four-unit A GCE (Single Award) are 360.

The guided learning hours for the four-unit AS GCE (Double Award) are 360. The guided learning hours for the eight-unit A GCE (Double Award) are 720.

1.4 Prior Learning

Candidates should have achieved a general education level equivalent to Level 2 in the National Qualifications Framework. Skills in Numeracy/Mathematics, Literacy/English and Information Communication Technology will be relevant. Prior study of the GCSE in Health and Social Care (double award) will be of benefit to candidates but is not mandatory; however, no prior level of attainment in Health and Social Care is required for this qualification.

1.5 Progression

The structure of this specification, allowing either staged or end-of-course assessment, enables candidates to defer decisions about progression from AS to the full Advanced qualification.

Advanced Subsidiary (AS) may be used in one of two ways:

- to lead to a final Advanced Subsidiary qualification (single or double award), allowing candidates to broaden their studies;
- to provide the first half (50%) of an A level qualification (single or double award).

A level (A) comprises two parts; AS – 50% of A award and A2 – 50% of the total award.

Both AS and A are available as a single or double award.

This specification provides a suitable foundation for the study of Health and Social Care or a related area through a range of higher education courses (e.g. Health and Social Care, Community Health Studies, Nursing (registered)); progression to the next level of vocational qualifications (e.g. NVQ Levels 3 and 4 in management); or direct entry into employment. In addition, the specification provides a coherent, satisfying and worthwhile course of study for candidates who do not progress to further study in this subject.

These qualifications are not designed for candidates’ direct entry into employment in this sector.
1.6 Rationale

GCEs in vocational subjects are broad based vocational qualifications designed to widen participation in vocationally related learning post-16.

This is achieved by ensuring that candidates develop the general skills, knowledge and understanding needed within the sector.

This specification:
- Serves to provide a broad educational basis for further education or for moving into employment within the Health and Social Care Sector.
- Builds upon the broad educational framework supplied by the Qualification and Subject Criteria.
- Provides a suitable route for progression for candidates completing GCSE Health and Social Care.
- Candidates beginning their formal education in the subject at post-16 level can also undertake the course of study.
- AS and Advanced GCE in Health and Social Care provide worthwhile courses for candidates of various ages and from diverse backgrounds in terms of general education and lifelong learning.
- Employs an investigative and problem solving approach to the study of the subject.
- Provides opportunities for candidates to develop key skills in the areas of Communication, Application of Number, Information Technology, Working with Others, Improving own Learning and Performance and Problem Solving.

The content of AS will focus on the needs of individuals and the techniques and professional services aimed at meeting those needs. Candidates will be assessed in the following areas of study:
- rights, responsibilities and values
- communication in care settings
- health and well-being.

The content of A2 will develop the AS content through addressing the factors affecting and issues involved in service delivery. Candidates will be assessed on the following areas of study:
- service provision and practitioner roles
- understanding human behaviour
- their ability to draw together aspects of these areas in a variety of contexts.

1.7 The Wider Curriculum

The study of Health and Social Care should by its nature contribute to candidates’ understanding of spiritual, moral, ethical, social, legislative, economic and cultural issues; including taking responsibility for ones own actions. It also encourages candidates to understand and discuss the decisions that may influence Health and Social Care policies and the subsequent effect on the well-being of the population and the provision of support in the community.

In order to understand the nature of Health and Social Care, learning is applied to a range of work related contexts. This can be achieved through a variety of approaches including work experience, links with local employers, case studies and research.
1.8 Prohibited Combinations and Overlap

Every specification is assigned a national classification code indicating the subject area to which it belongs. Centres should be aware that candidates who enter for more than one GCE qualification with the same classification code would only have one grade (the highest) counted for the purpose of the School and College Performance Tables. The classification code for this specification is 0003.

This specification is distinctive and does not overlap significantly with any other. There are no prohibited combinations.

1.9 Equality and Fair Assessment

This specification has been designed to offer fair access for all candidates and to minimise any later need to make reasonable adjustments for candidates who have particular requirements, while preserving the rigour of the qualification. A review of the specification and the regulatory criteria on which it is based has not revealed any potential barriers to access arising from the assessment of skills and understanding in the subject.

Details of the special arrangements and special consideration for candidates with particular requirements are contained in the Joint Council for Qualifications document Regulations and Guidance relating to Candidates who are Eligible for Adjustments in Examinations. Copies of this document are available from WJEC.


The AS and A level specification in Health and Social Care should encourage candidates to:

- Develop and sustain an interest in health, early years care and education, social care and issues affecting the care sector.

- Acquire knowledge and understanding of health, early years care and education and issues affecting the health and social care sector.

- Develop skills that will enable them to make an effective contribution to the care sector including skills of research, evaluation and problem solving in a work related context.

- Apply knowledge, understanding and skills.

- Prepare for further study and training.
Assessment Objectives:

Candidates should demonstrate the following objectives throughout the course of their study in a range of contexts that are work-related:

**AO1: Knowledge, understanding and skills**
Candidates demonstrate relevant knowledge, understanding and skills.

**AO2: Application of knowledge, understanding and skills**
Candidates apply knowledge, understanding and skills.

**AO3: Research and Analysis**
Candidates use appropriate research techniques to obtain information from a range of sources. Candidates analyse work-related issues and problems.

**AO4: Evaluation**
Candidates evaluate evidence, make judgements and draw conclusions about work-related issues.

Assessment objective weightings are shown as a % of each qualification towards which units may contribute.
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Advanced Subsidiary

Unit 1: Promoting Quality Care and Communication

Introduction

This AS unit is a mandatory unit that will be externally assessed.

The unit introduces candidates to factors affecting the quality of life. The care principles, skills and techniques required by both formal and informal carers to treat individuals well within a range of care settings. This unit provides a basis for the understanding and application of other units.

The content of this unit includes:

- Factors affecting the quality of life of individuals
- Principles of care
- Caring skills and techniques
- Communication
- Barriers to communication and quality care
- Rights and responsibilities of providers and individuals

Content

1.1 Factors affecting the quality of life of individuals

The candidates should know the following factors affecting the quality of life of individuals within different care settings:

- **Physical factors** – exercise, diet, physical comfort and safety, hygiene, pain relief
- **Intellectual factors** – stimulation, engaging in activities
- **Emotional factors** – privacy, dignity, approval, psychological security, autonomy
- **Social factors** – social contact and support
1.2 Principles of care

The candidates need to have knowledge and understanding of the principles of care that influence the working practices of care workers in providing quality care. Candidates should know how the principles of care protect both individuals and care workers and understand and apply the principles within different care settings.

- Promoting effective communication and relationships
- Promoting anti-discriminatory practice (including policies and codes of practice)
- Maintaining confidentiality of information
- Promoting and supporting individuals’ rights to dignity, independence, empowerment, choice and safety
- Acknowledging individuals’ personal beliefs and identity and respecting diversity
- Protecting individuals from abuse
- Providing individualised care

1.3 Caring skills and techniques

The candidates should be able to know and understand how both formal and informal carers use caring skills in their treatment of individuals. They should apply this knowledge within different care settings.

- Encouraging – motivating and supporting individuals through difficult times and procedures
- Showing approval – giving praise
- Creating trust – building relationships, maintaining confidentiality and being consistent
- Gaining compliance – giving reasons and giving choices without coercion
- Social perception – being able to recognise an individual's feelings and needs
- Observation – visual observation, noticing changes in behaviour, food intake and wakefulness, as well as medical observations including measuring temperature and blood pressure
- Disengagement – temporarily moving away to enable an individual to calm down, ‘time out’
- Distraction – providing a temporary distraction to divert an individual from their own anxiety or pain, teaching an individual to develop their own distraction techniques
- Physical contact – to provide appropriate psychological security or approval
- Modelling – using only acceptable behaviour so that the individual can learn to act in a similar way
- Working alongside – engaging in the same activity as the individual
- Setting challenges – suggesting achievable targets to an individual
- Safe Working Practices – lifting, hygiene practices, maintaining own safety
1.4 Communication

The candidates should have knowledge and understanding of the different types of communication and their importance in contributing to quality care of individuals as well as the effective working of others within the care team. Candidates need to understand and be able to evaluate the factors that govern the effectiveness of verbal and non-verbal communication.

Different types of communication:

- Written – letters, policies, email, records
- Verbal – speaking, singing, active listening
- Non-verbal – body language, gestures, mime and drama, music, art and craft
- Graphical – posters, signs, symbols and diagrams
- Alternative methods of communication – British Sign Language, Makaton, Braille, Widget

Factors affecting the effectiveness of communication:

- Emotional factors – personality clashes, stress and anxiety, empathy, worry and mood
- Environmental factors – personal appearance, proximity, seating arrangements, background noise, lighting, comfort and warmth
- Physical or intellectual disabilities
- Cultural influences
- Stereotyping and labelling – making assumptions about others
- Time constraints and pressures
- Use of technical terminology or colloquialisms
- Appropriate use of speed, clarity and loudness
- Use of eye contact, facial expressions, body language
- Legibility and accuracy – written documentation
- Lack of resources

1.5 Barriers to communication and quality care

Candidates should understand the different barriers that could affect communication and the quality of care provided.

Barriers to effective communication and quality care:

Related to the care workers

- Attitude and prejudice – discrimination, stereotyping, labelling
- Lack of motivation
- Conformity to workplace norms
- Lack of skill
- Preoccupation with own needs
- Ethical dilemmas
- Stress and physical strain
Related to the individual

- Lack of status
- Social exclusion
- Physical impairment
- Concealing problems
- Attention seeking
- Hostile behaviour
- Feelings of frustration and isolation
- Communication barriers - sensory impairments, learning disabilities, language barriers
- Poor access to services and resources – physical, psychological, financial, lack of information, geographical, cultural and language barriers

Strategies to overcome barriers:

Related to care workers

- Clear and effective policies and codes of practice
- Training
- Advice and support within the workplace
- Appraisal, continuing professional development procedures

Related to individuals

- British Sign Language, Makaton, Braille, Widget
- Equipment – hearing aids, adapted computers, electronic voice output, pendant call system community alarm aid
- Use of an advocate
- Use of support groups
- Interpreter
- Facilitating access – e.g. use of ramps
- Adapted equipment and facilities
- Anger management/assertiveness training

1.6 Rights and responsibilities of providers and individuals

Candidates should have knowledge of the key principles of legislation designed to protect the rights of individuals:

- The Disability Discrimination Act 1995
- Race Relations Act 1976
- Mental Health Act 1983
- Sex Discrimination Act 1975
- Human Rights Act 1998
- NHS and Community Care Act 1990
- The Children Act 1989
- The Work and Families Act 2006
- The Data Protection Act 1994
- The Access to Personal Files Act 1987
- The Health and Safety at Work Act 1973
Candidates should understand how systems of redress, safeguard and promote the rights of individuals and practitioners.

- Organisational policies (admissions, health and safety, equal opportunities)
- Local complaints procedures
- Industrial Tribunals
- Regulatory Bodies
- Ombudsman
- Commissions – Equal Opportunities, Racial Equality, Human Rights, Disability Rights
- European Court of Human Rights

**Assessment**

Assessment for this unit will be through an external test based on the content of the unit. There will be one examination (1½ hours).

Candidates will be required to respond to short-answer questions, structured questions and free response questions drawn from topics detailed in the contents section.

Candidates will be expected to apply their knowledge and understanding to case studies set in a vocational context by making reasoned judgements and presenting appropriate conclusions.

Centres will need to consider how best to prepare candidates effectively for the examination and to allow sufficient time for revision and examination technique to be developed.
Unit 2: Promoting Good Health

Introduction

This AS unit is a mandatory unit that will be internally assessed.

This unit will enable candidates to gain knowledge and understanding of the factors that influence an individual’s health and well-being, and how recent government initiatives promote good health.

The content of this unit includes:

- Perspectives of health and well-being
- Factors that affect health and well-being
- Preventative measures to avoid ill health
- Job roles of key workers in Health Promotion
- Techniques used within Health Promotion

Content

2.1 Perspectives of health and well-being

The candidates should know and understand that health and well-being can be affected by:

- Models and concepts of health, including positive and negative attitudes
- National and local initiatives and health improvement programmes
- Personal responsibility for health

2.2 Factors that affect health and well-being

The candidates should have knowledge and understanding of how factors can affect an individual’s health and well-being:

- Lifestyle choices – diet, exercise, substance abuse, alcohol, smoking, incidence of sunbathing /using sun beds
- Work/life balance
- Stress
- Environmental issues – housing, pollution, socio-economic, workplace, socialisation
- Financial factors – income, expenditure, debt
- Physical, intellectual, social and emotional factors
- Attitudes and prejudice/discrimination
- The role of the mass media in influencing lifestyles
- The influence of family, dependents, friends, peers and colleagues
2.3 Preventative measures to avoid ill health

The candidates need to recognise and understand that ill health may be reduced by:

- Personal responsibility – client centred and the wider community approach to good health
- Screening – prenatal, post-natal, male/female, preventative, diagnostic
- Immunisation – childhood, travel, incidental
- Specialist support – statutory, private and voluntary services
- Self-help approach – self-referral, maintaining individuals personal health
- Government initiatives place duty of care on Local Authority and Health Boards – current guidelines to promote good health
- Role of education in promoting good health – statutory education, NHS, and the media

2.4 Job roles of key workers in health promotion

Candidates will need to understand the different job roles of key workers involved in Health Promotion and their responsibilities when promoting good health.

- Health Education Specialists
- Health Visitor
- Community Health Care workers
- Environmental Health Specialists
- GP

The following may also contribute to the promotion of good health:

- Youth workers
- Community liaison officers
- Police officers
- Teachers and lecturers
- Voluntary organisations

They will need to know the main duties of their roles, where they are based, how they are accessed and how they communicate with individuals / service users.

2.5 Techniques used within health promotion

Candidates will need to investigate the various techniques and approaches used in Health Promotion campaigns:

- The classification of promotional activities
  Primary – aimed at reducing risks to the entire population
  Secondary – aimed at reducing risk factors for people already at risk
  Tertiary – aimed at people suffering from ill health, social disease or disability
- Key terms – preventative, empowerment, educational, medical, client centred, fear
- Methods used to provide information for individuals e.g. TV, mixed media, posters, leaflets
- Style – relating to the design of materials
- Ways used to measure outcomes / success of promotions
Assessment

This unit is internally assessed and requires candidates to produce a portfolio evidencing the planning and preparation, execution and evaluation of a small health promotion campaign aimed at a specific target group.

Planning / Preparation

This should include:

- Introduction
- Rationale
- Justification for choice of area of health concern and target group
- Research – reference should be made to recent government initiatives specific to the area of health concern specified
- Aims and objectives of the proposed campaign
- Choice and justification of approaches that will be used, including methods of communication suitable to the target group
- Structure of the campaign
- Identification of suitable resources

The campaign

This should include:

- Targets set for the individuals
- Preparation and presentation of materials
- Carrying out the campaign and recording results
- Collecting and interpreting feedback from the participants
- Documented evidence (as/if applicable) of campaign

Evaluation

This should include:

- The success in meeting aims and objectives
- The appropriateness of the planning and execution of the campaign (including materials produced, resources used, chosen approaches) to the target group
- Analysis of feedback
- How the benefits could be measured within the target group both in the short and long-term
- Evaluation of the success of the campaign, including a self-evaluation
- Valid recommendations for improvement and for extension work
- Evaluation of the suitability of this campaign for use by relevant key workers
<table>
<thead>
<tr>
<th><strong>Unit 2: Promoting Good Health</strong></th>
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</thead>
<tbody>
<tr>
<td><strong>Assessment evidence:</strong></td>
</tr>
<tr>
<td>Candidates are required to produce a portfolio that evidences the research, planning, preparation and carrying out of a small-scale health promotion campaign aimed at a chosen target group.</td>
</tr>
<tr>
<td><strong>AO1:</strong> Knowledge and understanding of perspectives of health and well-being and ill health in relation to the chosen target group. Knowledge of factors that affect the health and well-being of the chosen target group.</td>
</tr>
<tr>
<td><strong>AO2:</strong> Present evidence of planning and carrying out the campaign aimed at the chosen target group.</td>
</tr>
<tr>
<td><strong>AO3:</strong> Relevant research and analysis when planning, designing, conducting and monitoring of the campaign. Research and analysis of current government initiatives in relation to the target group/chosen topic.</td>
</tr>
<tr>
<td><strong>AO4:</strong> Evaluation of the success of the promotional activity in meeting the needs of the target group and the possible short and long term effects on an individual. Suggest possible improvements to the promotional campaign.</td>
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</tbody>
</table>
### How candidates will be assessed:

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<thead>
<tr>
<th>Assessment objective</th>
<th>Level of achievement 1</th>
<th>Level of achievement 2</th>
<th>Level of achievement 3</th>
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<tr>
<td><strong>AO1</strong></td>
<td>The candidate will:</td>
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<td></td>
<td>• Identify some aspects of health and ill-health.</td>
<td>• Provide a basic description of different perspectives of health and ill-health.</td>
<td>• Provide a detailed description which demonstrates understanding of different perspectives of health and ill-health.</td>
<td>• Provide a comprehensive and accurate description which demonstrates understanding of the different perspectives of health and ill-health.</td>
</tr>
<tr>
<td></td>
<td>• Outline some of the factors that can affect health with little or no reference to the target group</td>
<td>• Outline the factors that can affect health with particular reference to the chosen target group.</td>
<td>• Identify and describe the factors that can affect the health status of the chosen target group and describe the short and long term effect of these factors on individuals.</td>
<td>• Explain in detail the factors that can affect the health status of the target group and demonstrate knowledge and understanding of the short and long term effect of these factors on individuals.</td>
</tr>
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<td>The candidate will:</td>
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<tr>
<td>• Provide general description of the campaign.</td>
<td>• Identify the basic aims of the campaign.</td>
<td>• Present detailed aims of the campaign.</td>
<td>• Present detailed and realistic aims of the campaign which address all areas of the delivery.</td>
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<tr>
<td>• Present limited evidence of the delivery of a campaign.</td>
<td>• Describe the chosen methodology to be used for the delivery of the campaign some reference may be made to any of the following: the target group, time scales, resources or health and safety issues.</td>
<td>• Describe in detail the chosen methodology to be used for the delivery of the campaign referring to the following: target group, time scale, resources or health and safety issues.</td>
<td>• Present detailed information on the chosen methodology for the delivery of the campaign and fully discuss the target group, time scales, resources and health and safety issues.</td>
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<td><strong>AO3</strong></td>
<td>The candidate will:</td>
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<td></td>
<td>- Identify a target group.</td>
<td>- Research and identify a target group.</td>
<td>- Present relevant research which supports the choice of target group.</td>
<td>- Analyse relevant and current research and explain how it supports the choice of target group.</td>
</tr>
<tr>
<td></td>
<td>- Give a brief description of a current Government health initiative.</td>
<td>- Research a current Government health initiative aimed at the chosen target group.</td>
<td>- Research current Government health initiatives and discuss their suitability for the chosen target group.</td>
<td>- Research in detail current Government health initiatives. Assess their purpose and possible effects on the health and well-being of the target group.</td>
</tr>
<tr>
<td></td>
<td>- Briefly describe a possible method of delivery for the campaign.</td>
<td>- Research mode of delivery for the campaign.</td>
<td>- Research and analyse potential modes of delivery for the campaign and present evidence of their suitability to the target group.</td>
<td>- Research and make a detailed analysis of modes of delivery for the campaign and discuss the reasons for choice in relation to their suitability for the target group.</td>
</tr>
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<td>AO4</td>
<td>The candidate will:</td>
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<td></td>
<td>• Identify the strengths of the campaign.</td>
<td>• Identify the strengths and weaknesses of each stage of the campaign.</td>
<td>• Describe the strengths and weaknesses of each stage of the campaign.</td>
<td>• Discuss the strengths and weaknesses of each stage of the campaign.</td>
</tr>
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<td></td>
<td>• Comment on the success of the campaign with brief reference to the target group.</td>
<td>• Identify the benefits of the campaign to the target group.</td>
<td>• Describe the possible short and long term effects of the campaign on the target group.</td>
<td>• Explain the possible short and long term effects of the campaign on the target group.</td>
</tr>
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<td></td>
<td>• Describe the feedback obtained from the target group.</td>
<td>• Analyse and comment on the feedback obtained from the target group.</td>
<td>• Analyse and evaluate the feedback obtained from the target group.</td>
</tr>
<tr>
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<td></td>
<td>• Suggest improvements to the campaign.</td>
<td>• Describe practical and relevant improvements to the campaign.</td>
<td>• Present suggestions for improvements to the campaign which are appropriate and consistent with the identified weaknesses.</td>
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<td>• Discuss, but may give summaries rather than conclusions.</td>
<td>• Discuss and draw conclusions that are based upon evidence obtained.</td>
<td>• Draw valid conclusions from the evidence present which are clear, well reasoned and detailed.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Any conclusions will be simple and may be offered without supporting argument.</td>
<td>• Describe how the campaign may be suitable for use by relevant key workers.</td>
<td>• Evaluate the suitability of the campaign for use by key workers.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Consideration of the use of campaign by relevant key workers.</td>
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Optional Advanced Subsidiary Units

Unit 3: Child Development: Principles and Theories of Growth and Development (0-8 years)

Introduction

This is an AS optional unit that is internally assessed.

This unit introduces candidates to the principles of children’s growth and development. This will include theorists’ views on growth and development from birth to eight years.

The content of this unit includes:

- The general principles of growth and development of children 0-8 years
- Factors affecting development
- The importance of play
- Play environments

Content

3.1 The general principles of the growth and development of children 0-8 years

The candidates will need to know and understand the main principles of development of:
- Infant (0 –12 months)
- Early Years (13 months to 3 years)
- Childhood (4 – 8 years)

3.1.1 Physical Development

- The biological aspect
- The use and purpose of measurements e.g. centile charts
- Normative measures
- Sensory development – vision, touch, hearing, taste, smell and proprioception
- The key milestones of development for gross and fine motor skills, and coordination

3.1.2 Cognitive / Intellectual Development

- Thinking process
- Problem-solving and memory
- Imagination and creativity
- Reasoning
- Perception
- Concentration and attention
- The theorists linked to cognitive development, to include, Piaget, Pavlov, Watson, Bandura
3.1.3 Language Development

- Components of language development e.g. receptive and expressive speech, articulation, listening, expressive language, facial expression and gesture, drawing and painting, reading and writing, and sign language
- Stages of communication, pre-linguistic and linguistic
- Difficulties in communication e.g. language delay, impairments, language barriers
- The theorists linked to language development e.g. Vygostky, Chomsky, Bruner, Skinner and Piaget

3.1.4 Social and Emotional Development

- Social interaction
- Importance of attachment
- Consequences of separation from primary carers
- Development of feelings and awareness of oneself; self-concept, self-esteem, self-image and self-reliance
- Development of feelings towards other people
- Development of personality
- Development of relationships with other people
- The theorists linked to social and emotional development – Freud, Erikson, Piaget, Kohlberg, Bowlby and Ainsworth

3.2 Factors affecting development

Candidates need to know and understand that the process of a child’s development may be affected by:

- Biological factors: genetic disorders; inherited disorders, learning disabilities, disabilities/ill health/disease
- Cultural factors: ethnicity; education; travel; cultural experiences; custom and tradition
- Psychological / Social factors: self-esteem, self-concept, relationships, family: friends; gender; social class; socialisation; isolation; poor attachment; stereotyping and discrimination, education
- Economic / Environmental factors: income - to include employment, unemployment and poverty; nutrition/diet; environment i.e. housing, neighbourhood location, opportunities for play/resources; lack of stimulation, government initiatives and funding e.g. sports activities, breakfast clubs, fruit tuck shops

3.3 The importance of play

Candidates will need to know and understand the role of play in the development of children.

- Stages of play i.e. solitary, parallel, associative, co-operative and social play
- Types of play i.e. creative play, imaginative play, manipulative play, social play, physical play and sensory play
- Theorists in play and education – Froebel, Montessori, Steiner, McMillan and Isaacs
3.4 Play environments

Candidates will need to know and understand that different environments are an important factor on a child's ability to play and learn:

- The home
- Child care settings
- Educational settings
- Opportunities for children to explore, investigate and to use a range of materials and equipment
- The importance of reducing risks and promoting safety within all settings e.g. home, indoor and outdoor play areas, this may include legislation, policies and procedures

Assessment

This unit is internally assessed and requires candidates to produce a child study that compares a chosen child with the expected norms of development. They will need to be able to justify and explain any variations from the norm, relating to the work of theorists and the factors that may affect a child’s development.

The study should include:

- Introduction and aims of study, including background, environment, family grouping, education, hobbies of the child and acknowledging and maintaining confidentiality of the individual
- Established norms of development: physical, intellectual, cognitive, language, emotional and social related to age of the child
- Types of play that promote development of the child
- Through observations provide an explanation of:
  - the growth and development of the child compared with the established norms; including physical, intellectual, cognitive, language, emotional and social milestones
  - the factors affecting the development of the child; biological, socio-economic, environmental, including the role of play and its effects on development
  - the implications of any current government initiatives e.g. introduction of a breakfast club to the school
- A comparative analysis of the development of the child in relation to theorists
- An evaluation to include the success in meeting the aims of the study; the appropriateness of the procedures used for collecting data; ethical issues related to the study; suggestions for improvement or further development
**Unit 3: Child Development: Principles and Theories of Growth and Development (0-8 years)**

**Assessment evidence:**  
Candidates are required to produce a child study that compares the developmental pattern and growth rate of a child to the norms of development, and give sound justification and explanation for any variations that are observed.

<table>
<thead>
<tr>
<th>AO1:</th>
<th>An understanding of the key milestones relative to the age of the chosen child and of the factors that may affect a child’s development.</th>
</tr>
</thead>
<tbody>
<tr>
<td>AO2:</td>
<td>Comparisons of the child to the expected norms of development using observations and the work of theorists.</td>
</tr>
<tr>
<td>AO3:</td>
<td>Relevant research using a range of methods to determine the child's stage of development.</td>
</tr>
<tr>
<td>AO4:</td>
<td>An analysis and evaluation of the study, the procedures used and the results obtained.</td>
</tr>
</tbody>
</table>
### How candidates will be assessed:

<table>
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<td></td>
<td>• Provide a basic description of the child.</td>
<td>• Provide a basic description of the child and the expected norms.</td>
<td>• Produce a clear description of the child and highlight their developmental stage showing an understanding of targets and milestones.</td>
<td>• Produce clear and concise details about the child and cover all areas of development.</td>
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<tr>
<td></td>
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<td>• Refer to one of the expected norms of development.</td>
<td>• Produce a simple factual explanation of at least two factors that could affect a child’s development.</td>
<td>• Show an understanding of the milestones.</td>
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<tr>
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<td></td>
<td>• Identify one factor that could affect a child’s development.</td>
<td>• Make reference to the work of least one theorist.</td>
<td>• Give a comprehensive account of the factors that affect a child’s development.</td>
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<td>• State how play can help to promote development.</td>
<td>• Describe the role of play in promoting development using simple terms.</td>
<td>• Demonstrate knowledge of the various types of play that promote development.</td>
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<td>• Compare the child with one of the norms of development.</td>
<td>• Include a basic comparison of the child against the norms.</td>
<td>• Include a detailed comparison of the child against the norms for each area of development.</td>
<td>• Produce an in-depth comparison of the child against the norms for each area of development.</td>
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<td>• Make an attempt to relate the work of a theorist to the stages of development observed.</td>
<td>• Make an attempt to apply the work of at least one theorist to the stages of development observed in the child.</td>
<td>• Describe the variations from the norm.</td>
<td>• Provide examples of specific milestones met by the child and justify any variations from the norm.</td>
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<td>• Compare and record some evidence through observation sessions.</td>
<td>• Collect their evidence through basic questionnaires, interviews and unstructured observation sessions.</td>
<td>• Research using a range of methodologies to produce a detailed factual description of the child to include suggested milestones / targets.</td>
<td>• Use both primary and secondary research to produce a detailed factual description of the child with reference to expected norms.</td>
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<td>• Comment on the evidence collected.</td>
<td>• Use only one or two sources to obtain evidence.</td>
<td>• Provide evidence that the research was appropriate and ethical.</td>
<td>• Provide evidence of well structured research, detailing how the ethical issues involved in gathering data from primary sources was resolved.</td>
</tr>
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<td>Evidence will reflect lack of understanding. No use of specialist vocabulary. The work will contain inaccuracies.</td>
<td>• Use the evidence collected to make judgements.</td>
<td>• Analyse, reflect on their research and make judgements.</td>
<td>• Analyse primary and secondary research in order to make informed judgements.</td>
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<td>• Identify the strengths of the study.</td>
<td>• Identify the strengths and weaknesses of the planning and execution of the study.</td>
<td>• Produce realistic comments on each stage involved in completing the study, highlighting strengths and weaknesses.</td>
<td>• Provide a detailed analysis of each stage of the study.</td>
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<td>• Suggest a method of improving the study.</td>
<td>• Present suggestions for improvement with little or no justification.</td>
<td>• Make realistic suggestions for improvement and further development explaining how these can be achieved.</td>
<td>• Use reasoned judgements to produce detailed recommendations for improvements and further developments. These should be valid and achievable.</td>
</tr>
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Unit 4: Creative Activities in a Range of Care Settings

Introduction

This AS unit is an optional unit and is internally assessed.

In this unit, candidates will explore the different kinds of creative activities used by care professionals in a range of care settings to benefit individuals at different life stages.

The content of this unit includes:

- Creative activities
- Care settings
- Individuals with specific care needs
- Job roles of care workers using creative activities
- Applying the principles of care in creative activities
- Planning creative activities

Content

4.1 Creative activities

Candidates should recognise the different types of creative activities that may form part of an individual’s care programme including:

- Group activities – dancing, playing games
- Individual activities – reading a book, drawing
- Indoor activities – craft activities
- Social activities – singing, drama, meal preparation
- Intellectual activities – painting, reminiscing tasks
- Physical activities – swimming, exercise sessions
- Emotional activities – painting, playing with water and sand

Candidates should understand that the purpose of creative activities may be:

- Therapeutic – to improve or treat a condition
- Recreational – to provide stimulation, to prevent boredom

Candidates need to learn that creative activities can be beneficial to individuals in a variety of ways.

- Physical benefit – improve manipulative skills, cardiovascular improvement
- Intellectual benefit – improve concentration, development of language
- Social benefit – cooperation with others, develop relationships
- Emotional benefit – relaxation, security, pleasure
4.2 Care settings

Creative activities are used in a variety of care settings to ensure a whole person approach to care. Creative activities are used in different settings.

- Day care – for children as well as for older individuals and those with disabilities
- Residential care – hospices, care homes
- Hospitals
- Educational settings
- Resource centres

4.3 Individuals with specific care needs

Candidates should recognise and understand the ways different creative activities are used with individuals who have specific care needs:

- Physical disabilities
- Individuals with rehabilitation needs
- Learning disabilities
- Behavioural problems
- Sensory impairment
- Problems affecting mental health

Candidates should understand the importance of matching the activities to individuals, including individual needs, preferences and abilities. Candidates need also understand that inappropriate choice of activity can lead to barriers to individuals’ participation.

4.4 Job roles of care workers using creative activities

Candidates should be aware that within care settings there would be health and social care workers as well as other people who can create and assist in the development of creative activities. These may be:

- Those whose main part of their work is to design and implement creative activities
- Those who use creative activities as an additional part of their work

Workers within care settings:

- Residential care settings – creative activities co-ordinator
- Day care settings – visiting artists, teachers, care assistants
- Educational settings – educational psychologist, teachers, learning support assistants
- Special units – speech therapists
- Hospitals – occupational therapists
Candidates need to have a sound understanding of the requirements of the possible job roles when working with creative therapies:

- Qualifications and training required
- Skills and qualities
- Responsibilities
- Working as a team/individual
- Day to day work activities
- Work patterns for those whose main job role is providing creative activities

### 4.5 Applying the principles of care in creative activities

Candidates should understand the ways in which the principles of care are used when designing and implementing creative activities.

- Promoting equality and diversity
- Promoting individuals' rights to confidentiality
- Promoting individuals' rights to dignity, independence and choice
- Being sensitive to individuals' personal beliefs and identity
- Supporting individuals by effective use of communication skills

### 4.6 Planning creative activities

Candidates should recognise the need for individual participation in the planning stage of the process. It is important that candidates understand the different ways of encouraging individuals to take part in creative activities.

To plan and carry out any creative activities, candidates should have knowledge and understanding of the following:

- Selecting and agreeing appropriate creative activities
- Planning and organising resources
- Set relevant goals and targets
- Health and safety requirements
- Use of caring skills and techniques as well as effective communication skills
- Possible barriers to participation in creative activities
- Appropriate sources of feedback
- Recommendations for improvement
Assessment

This unit is internally assessed and requires candidates to produce a report containing research and delivery of a creative activity within a selected care setting.

The report should include:

1. Information about the different types of creative activities available with the possible physical, social and psychological benefits of the activities on individuals.

2. Explanations of the job roles and responsibilities of two care workers who organise creative activities for individuals. The explanation includes a comparison of the responsibilities, skills and qualifications of the selected care workers.

3. A general overview of the selected care setting.

4. A description of the chosen individual/group of individuals, their characteristics and their needs.

5. Descriptions of the different types of creative activities that could benefit the chosen individual/individuals, with an analysis of the major advantages to the chosen individual/individuals of participating in the suggested activities.

6. Possible barriers to the chosen individual(s) participating in the suggested activities with recommendations about how to overcome these barriers.

7. Records of how the creative activity is planned and implemented for the chosen individual(s). To include evidence of:
   - Interviews with individual/carer
   - Preparation of activity – resources required, costing, timing, location
   - Explanations about what the activity involves and how its success will be measured with the sources of feedback noted
   - Health and safety considerations
   - Application of the principles of care
   - The implementation of the activity

8. An evaluation of the success and effectiveness of the creative activity in meeting the needs of the chosen individual/individuals through:
   - Identifying the benefits of the creative activity and outlining the possible short term and long term effects of participating in the activity
   - Examination of the planning, organisation and implementation of the activity
   - The views of the individual(s) and other sources of feedback
   - Recommendations for the possible development of the activity
<p>| <strong>AO1</strong>: Knowledge and understanding about the different types of creative activities and the possible physical, social and psychological benefits of the activities on individuals. Consider the job roles of two care workers when creating or supporting creative activities and compare the responsibilities, skills and qualifications of the selected care workers. |
| <strong>AO2</strong>: Information and knowledge regarding their chosen individual(s) and the chosen care setting. Assessment of the individuals' needs and requirements and consideration of possible creative activities that could benefit the chosen individual. Consider the possible barriers that the chosen individual(s) could face when participating in these possible creative activities with realistic recommendations to overcoming these barriers. |
| <strong>AO3</strong>: Relevant research and analysis when planning, designing, conducting and monitoring a creative activity with the chosen individual/individuals. |
| <strong>AO4</strong>: Evaluation of the success and effectiveness of the creative activity in meeting the needs of the individual(s). Make reasoned judgements about the possible short-term and long-term effects of the activity on the individual. Suggest possible improvements to the creative activity. |</p>
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<td>● State one purpose of</td>
<td>● Give basic descriptions of the purpose of creative activities.</td>
<td>● Give detailed description of the purpose of creative activities used for both therapeutic and recreational purposes.</td>
<td>● Give an accurate explanation of the purpose of creative activities used for both therapeutic and recreational purposes.</td>
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<td>creative activities.</td>
<td>● Describe several creative activities and identifies how they benefit individuals, focussing mainly on physical benefits.</td>
<td>● Describe a range of creative activities and describe how they benefit individuals in more than one area of development.</td>
<td>● Describe a wide range of creative activities and explain how they benefit individuals in all areas of development.</td>
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<td>● Identify two physical creative activities and state how they can benefit individuals.</td>
<td>● Outline two job roles and identify within the roles provision of creative/therapeutic activities.</td>
<td>● Include a comprehensive and accurate description of at least two job roles and show detailed and accurate understanding of how the provision of creative activities fits within the main job role.</td>
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<td>• Provide an outline of the care setting.</td>
<td>• Provide a brief description of the care setting.</td>
<td>• Provide a description of the care setting.</td>
<td>• Provide a description of the care setting and its purpose in meeting the needs of individuals.</td>
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<td>• Identify one suitable activity stating how it may meet the needs of the chosen individual.</td>
<td>• Identify and describe the ways at least one suitable activity may meet the needs of the chosen individual. Evidence may focus mainly on one area of development.</td>
<td>• Identify and describe the ways at least three suitable creative activities will benefit and meet the needs of the chosen individual. Evidence will focus on more than one area of development.</td>
<td>• Explain in depth the ways at least four creative activities may benefit and meet the physical, social and/or psychological needs of the chosen individual.</td>
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<td>- Identify an activity.</td>
<td>- Undertake research</td>
<td>- Undertake research</td>
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<td>- State one aim of the activity.</td>
<td>which will include a basic interview to select an activity.</td>
<td>which will include a basic interview to select an activity.</td>
<td>showing initiative in the methods of obtaining evidence and information to select an appropriate activity.</td>
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<td>- Present limited evidence of preparation and delivery of the activity.</td>
<td>- State the aims of the activity.</td>
<td>- Clearly describe the aims of the activity to benefit the individuals’ well-being.</td>
<td>- Produce records of plans and materials for an appropriate activity which reveal flair and imagination and are likely to achieve explicitly stated aims to meet individual needs.</td>
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<td>- Present basic evidence of the preparation of the activity.</td>
<td>- Make clear links to health and safety issues and the principles of care when planning and implementing the activity.</td>
<td>- Make detailed analysis of health and safety issues and the principles of care when planning and implementing the activity.</td>
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<td>- Identify health and safety issues and the principles of care which may or may not link to the selected activity.</td>
<td>- Provide evidence of the implementation of the activity.</td>
<td>- Independently prepare resources for the collection of feedback from more than two sources.</td>
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<td>- Briefly describe at least one method of obtaining feedback.</td>
<td>- Include clear descriptions and materials for the collection of feedback from at least two sources.</td>
<td>- Give a detailed analysis of the feedback obtained.</td>
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<td>- Show basic skills in implementing and analysing the activity.</td>
<td>- Analyse the feedback obtained.</td>
<td>Evidence at this level will be structured clearly to communicate meaning. Technical vocabulary will be used accurately. The work will contain relatively few errors.</td>
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<td>- Identify strengths of the planning and delivery of the activity.</td>
<td>- Identify the benefits of the activity.</td>
<td>- Describe the potential long and short term benefits to the individual of participating in the activity.</td>
<td>- Explain the potential long and short term benefits to the individual of participating in the activity.</td>
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<td>- Make a suggestion for improvement.</td>
<td>- Identify the strengths and weakness of the planning, organisation and implementation of the activity.</td>
<td>- Describe the strengths and weakness of the planning, organisation and implementation of the activity.</td>
<td>- Discuss the strengths and weakness of the planning, organisation and implementation of the activity.</td>
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<td>- Comment on their own skills.</td>
<td>- Evaluate their own skills in the implementation of the activity.</td>
<td>- Evaluate the contribution of own skills in the implementation of the activity.</td>
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<td>- Describe the feedback obtained.</td>
<td>- Evaluate the feedback obtained.</td>
<td>- Evaluate the views of the individual and others from the feedback obtained.</td>
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<td>- Provide a brief description of the suitability of the activity.</td>
<td>- Give sound justification of the appropriateness of the activity.</td>
<td>- Fully justify activity decisions.</td>
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<td></td>
<td>- Give at least one suggestion for the improvement of the activity.</td>
<td>- Give relevant suggestions for improvement.</td>
<td>- Give suggestions for improvement or development of the activity which are appropriate and consistent with the weaknesses of the implementation of the activity.</td>
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Unit 5: Understanding Individuals with Disabilities

Introduction
This AS unit is an optional unit and is externally assessed.

This aim of this unit is to enable candidates to develop knowledge and understanding of a range of disability conditions and impairments. This will include specialist services that are available to meet the needs of individuals with disabilities.

The content of the unit includes:

- The meaning of disability
- Causes and effects of disabilities / impairments
- Disability conditions
- Legislation
- Care management process
- Service provision
- Barriers
- Aids and adaptations available to support individuals with disabilities

Content

5.1 The meaning of disability
Candidates need to have knowledge and understanding of:

- The ways in which “disability” can be defined using the medical and social models of disability
- Different types of disability – physical, sensory and learning disability
5.2 Causes and effects of disability / impairment

Candidates need to understand the main causes of physical disabilities, sensory impairment and learning disabilities and the effects they might have on the body function and ability of individuals.

These include:

- Chromosomal abnormalities – e.g. an additional chromosome causing Down’s Syndrome
- Genetic factors – defective genes
- Birth trauma – oxygen deprivation caused by hypoxia or physical injury
- Nutritional factors – poor nutrition
- Lifestyle factors – damage caused by smoking, alcohol, substance abuse, obesity
- Accidental – damage to the central nervous system through head, neck, or spinal injury
- Infectious disease – causing damage to key organs e.g. meningitis
- Acute / chronic disease – prolonged conditions that result in acute episodes or gradual degeneration
- Environmental factors – pollution, industrial related diseases
- Age-related factors – progressive degeneration of key systems

5.3 Disability conditions

Candidates need to be able to describe the causes, signs and symptoms, testing / diagnostic methods for the following conditions:

- Dementia, including Alzheimer’s disease
- Cerebral Palsy
- Cystic Fibrosis
- Down’s Syndrome
- Muscular Dystrophy (Duchenne)
- Multiple Sclerosis
- Osteoarthritis
- Spina Bifida

Candidates will need to apply their knowledge and understanding of the above conditions to individuals in different scenarios.
5.4 Legislation

Candidates need to understand the broad aims, main provision and limitations of the following legislation:

- The NHS and Community Care Act (1990)
- The Carer’s Recognition Act (1996)
- The Education Act 1996 (provision for children with special educational needs)
- The Children Act 1989

Candidates should understand how this legislation affects the provision of care services for individuals with disabilities and the work of care professionals within these services. They also need to consider the attitudes of society towards individuals with disabilities and understand how current legislation can protect individuals with disabilities from discrimination.

5.5 Care management process

Candidates need to understand the importance of care management in providing effective support for individuals with disabilities and know how the care management process works. Candidates should learn:

- How the needs of individuals with disabilities are assessed, including the eligibility criteria used
- The stages in the care planning process – assessment, planning and implementation of the care plan, monitoring and evaluation of the plan, reviewing the plan
- The methods used to carry out the monitoring and evaluation of the care plan
- The work of practitioners involved in care management and their key roles within a multi-disciplinary team
- How appropriate services are contracted to meet the needs of individuals with disabilities
- The benefits and possible drawbacks of a multi-disciplinary approach to care in relation to service users, service providers and care professionals
- The importance of the contribution made by informal carers to support the care plan and how they can be supported
5.6 Service provision

Candidates should be able to apply their knowledge and understanding of the services and support available for individuals with differing types of disability and personal circumstances. They should consider the benefits, limitations and effectiveness of the following services:

- Home care services
- Day care services
- Respite care
- Residential and nursing home care
- Specialist schools, units and nurseries
- Primary care services
- Voluntary organisations e.g. RNIB; Alzheimer’s Society
- Welfare benefits for individuals with disability including Disability Living Allowance, Attendance Allowance, Motability
- Independent living funds
- Services e.g. Access to work, ‘New Deal’ for individuals with disability

5.7 Barriers

Candidates need to have knowledge and understanding of the possible barriers facing individuals with disabilities when accessing services and how they might affect an individual’s quality of life. These include:

- Barriers relating to mobility
- Barriers relating to access to public buildings, work place, transport, leisure / social facilities, in the home
- Economic barriers and how they might limit access to services / facilities
- Communication barriers
- Barriers that result from prejudice and discrimination e.g. unfair discrimination, limited educational provision, restricted social inclusion
- Candidates also need to consider how these barriers could be overcome to improve opportunities for individuals with disabilities

5.8 Aids and adaptations available to support individuals with disabilities

Candidates need to be able to identify the different aids and adaptations available and assess their usefulness in meeting the needs of individuals with different disabilities. These include:

- Aids / adaptations to assist mobility
- Walking aids
- Adaptations to support daily living activities
- Communication aids
- Aids to enhance education / training
Assessment

Assessment for this unit will be through an external test based on the content of the unit. There will be one examination (1½ hours).

Candidates will be required to respond to short-answer questions, structured questions and free response questions drawn from topics detailed in the contents section.

Candidates will be expected to apply their knowledge and understanding to case studies set in a vocational context by making reasoned judgements and presenting appropriate conclusions.

Centres will need to consider how to best to prepare candidates effectively for the examination and to allow sufficient time for revision and examination technique to be developed.
Unit 6: Understanding common illnesses, diseases and disorders

Introduction

This AS unit is an optional unit that will be externally assessed. Candidates will gain knowledge and understanding of the causes, signs and symptoms of a range of common illnesses, diseases and disorders that might affect individuals.

The content of this unit includes:

- Understanding the basic concepts and terminology
- Categories of illness, disease and a disorders
- Infectious diseases
- Control of infectious disease
- Non-infectious diseases and disorders
- Risk reduction strategies

Content

6.1 Understanding the basic concepts and terminology

Candidates will need to:

- Understand the concept of 'health' as defined by the World Health Organisation.
- Understand the biomedical model of health and illness.
- Be familiar with the common terminology used to describe 'ill-health', such as: illness, disease and disorder. They should be aware that the terms are overlapping and whilst some may be more appropriate in specific contexts, in other circumstances they become interchangeable.

An illness is a subjective sensation, which might have physical and/or psychological causes.
A disease is recognised by a set of symptoms that define a diagnosable, physical or psychological problem.
A disorder is a malfunction of a body tissue, organ or system.

6.2 Categories of illness, disease and a disorder

Candidates will need to:

- Have a basic understanding of the following categories of ill-health and give at least two examples of each:

  Infectious – e.g. tuberculosis (TB), influenza
  Deficiency – e.g. rickets, scurvy
  Mental – e.g. depression, bipolar disorder
  Social /lifestyle – e.g. sexually transmitted, smoking-related diseases
  Degenerative – e.g. osteoarthritis, cardiovascular disease
  Inherited – e.g. cystic fibrosis, red-green colour-blindness

  They should also be aware that there can be an overlap between the categories.
6.3 Infectious diseases

Candidates will need to know that:

- Infectious diseases are caused by pathogens. These include: bacteria, viruses, fungi (micro-organisms) as well as larger endo and ecto parasites (macro-organisms).

- Pathogens can be transmitted from one individual to another by a number of routes:
  - Portals of entry – through breaks / openings in the skin, the respiratory tract, gastrointestinal tract and urinogenital openings
  - Contact – touching, kissing, sexual intercourse
  - Droplet transmission – coughing, sneezing
  - Vehicle transmission – water, food, blood, in the air
  - Animal vectors – flies, mosquitoes, rats

Candidates should be able to identify the causal organism and describe the transmission and symptoms of one example of each of the following types of infectious disease:

- Bacterial disease – i.e. Chlamydia or MRSA
- Viral disease – i.e. influenza or HIV
- Fungal disease – i.e. athlete's foot or thrush
- Parasitic – endo or ecto i.e. head lice or tapeworms

6.4 Control of infectious diseases

To reduce the risk of transmission of infectious diseases, candidates should have knowledge of the following approaches:

- Safe behaviour – e.g. use of condoms, isolation of infected people (e.g. MRSA patients), use of personal protective equipment (e.g. gloves, aprons, masks)
- Personal hygiene practices – e.g. alcohol rubs, washing hands
- Development and maintenance of effective sanitation, treatment of drinking water
- Maintaining a clean environment – removal of potential pathogens – cleaning schedules
  - Chemical disinfection techniques e.g. sanitation of food preparation surfaces
  - Sterilisation e.g. use of autoclaves
  - Prevention of recontamination e.g. post operative care

To prevent/overcome infectious diseases in the individual, candidates will need to understand and be able to explain:

- Types of immunity
  - Natural immunity – active and passive, with examples of how each can be conferred
  - Artificially induced immunity – active and passive, with examples of how each can be conferred
Where appropriate, the role of lymphocytes in the production antibodies and subsequent presence of ‘memory’ lymphocytes will be required.

- The common immunisation schedules for the following life stages:
  - Infancy and Childhood
  - Adolescence
  - Old Age

- Issues of concern associated with immunisation
  - Side effects – mild form of the disease/possible reactions
  - Duration of immunity
  - Cultural views and beliefs in relation to immunisation

### 6.5 Non-infectious diseases and disorders

For each of the following diseases/disorders, candidates will need to know:

- the common symptoms and effects of the individual
- the causes/risk factors
- at least one diagnostic technique
- at least one form of treatment

- Osteoporosis
- Coronary artery disease
- Cystic Fibrosis

### 6.6 Risk reduction strategies

Candidates need to know, understand and evaluate the strategies used to reduce the risk of developing diseases:

- Personal lifestyle choices: eat and exercise sensibly, monitor body weight, limit alcohol consumption, stop smoking or drug use, good personal hygiene, stress management.

- Local strategies – all catering for the local needs and requirements: health information booklets from local health centres, well woman and man clinics, family planning centres, GUM clinics, c-card schemes, together with the role of the Local Health Board (Welsh centres) or the Primary Care Trusts (English centres) Heath, Social Care and Well-being strategies (Wales), Health and Well-being strategies (England).

- National Strategies: anti-smoking initiatives, drink awareness campaigns, 5 a day promotions, STD related campaigns.

- Screening tests that may be suitable for the whole population or for specific vulnerable groups – people of a specific age, people with a family history of a particular disease and people employed in hazardous occupations.
Candidates are also required to have:

- A general knowledge of the main screening tests that may be carried out during the life of an individual.
  i.e. antenatal – ultrasound, amniocentesis, blood tests
  infant/child – development checks, eye tests, hearing tests, height/weight measurements, dental inspections, blood tests
  adult/elderly – blood pressure, cholesterol levels, blood tests, height/weight measurements, smear tests, eye tests, mammography, bone density

**Assessment**

This unit is assessed through an external examination (1½ hours).

The external test will assess the candidate's knowledge, understanding and skills relating to common diseases and disorders. The test will consist of a series of short answer and free response questions based on case study scenarios in different work contexts and dealing with clients at different life stages.

Candidates will also be required to analyse research data relating to illnesses, diseases and disorders and to evaluate and make judgements on the basis of the evidence.
Advanced Level

Unit 7: Provision of Health, Social Care and Children’s Service

Introduction

This A2 unit is a mandatory unit that will be externally assessed.

In this unit, candidates will need to study the main health, social care and children’s services to meet individual needs.

The content of the unit includes:

- Service provision in the local area
- Meeting individual needs
- Practitioner roles within multi-disciplinary teams
- Quality assurance procedures
- Effects of national policy and legislation on service provision

Content

7.1 Service provision in the local area

Candidates should understand that the provision of care services is complex and rapidly changing.

Candidates should be able to apply their knowledge and understanding of:

- The purpose of the main services involved in health care, social care and children’s services:

  Health services:  Primary (e.g. health centre, dentist)
                  Secondary (Hospitals)
                  Tertiary (hospices, rehabilitation)

  Social care services:  Social Services, Residential care, Community care
                        (e.g. day centres, domiciliary care, transport)

  Services for children:  Education (crèche, pre-school provision, primary school)
                         Adoption and Fostering
• How the statutory, private / independent, voluntary and informal care sectors work together to provide a comprehensive range of services in the local area through a mixed economy of care
• How the main health, social care and children’s services are organised and funded
• How the planning of services is influenced by demographic characteristics i.e. health needs, age profile of the population, number of single parents, level of unemployment, disability, level of deprivation
• How national standards, targets and priorities influence local planning

7.2 Practitioner roles within multi-disciplinary teams

Candidates need to understand the work carried out by formal care practitioners in health, social care and children’s services and how they may work both individually and as part of a team.

Candidates need to understand:

• The specific roles and responsibilities of practitioners
• How a multi-disciplinary team can provide a “seamless” service through the delivery of an integrated package of care to meet the needs of individuals
• How early intervention and prevention may benefit individuals and prevent a crisis situation

7.3 Meeting individual needs

Candidates should understand that care practitioners and professionals within the field must be able to identify and respond to the changing physical, intellectual, emotional and social needs of individuals and the ways this may be achieved.

Candidates need to understand:

• The purpose of individual care assessments and plans and their importance in meeting the needs of individuals
• The main stages in the care planning cycle
• The importance of an individual's involvement in the care planning process (empowerment)
• How service provision is tailored to meet the individual needs of clients
• How individuals might benefit from effective care planning
• The contribution of informal carers in meeting the needs of individuals

7.4 Quality assurance procedures

Candidates should understand that quality issues are now a major theme of national care policy. Organisations have become increasingly aware of the need to provide services that are of a high standard and recognise their accountability for such services.
Candidates need to understand:

- Quality assurance in care

- How organizations implement quality assurance procedures through:
  - Individual roles and responsibilities
  - Improving information, consultation and communication with individuals
  - Developing effective complaints procedures
  - Providing opportunities for staff / practitioners and individuals to make suggestions that might improve service provision
  - Implementing quality service care standards e.g. National Service Framework
  - Improving registration and inspection procedures

- How organisations manage and monitor the quality and effectiveness of the services they provide through:
  - Auditing and evaluating the quality of services experienced by individuals
  - Rewarding good practice
  - Using performance measures e.g. star ratings
  - Improving training within the sector
  - Accountability for care practitioners

Candidates will need to know of current government initiatives that are designed to improve the quality of service provision i.e. patients' charters, citizens' charters, National Service Frameworks, The Commission for Social Care Inspections e.g. star ratings, patient surveys, charter marks.

### 7.5 Effects of national policy and legislation on service provision

Candidates should understand the effects of legislation and national policies on care practice and service provision including:

- The possible effects on individuals e.g. rights and protection of individuals, access and barriers to services, consultation, managing individuals needs, confidentiality and ethical issues
- The possible effect on services and practitioners e.g. changes in existing provision, joint funding arrangements, greater accountability, changes in roles and responsibilities, partnership agreements
- The possible effects on care practices at national and local level e.g. improving quality, changes in the level and pattern of service provision, targeting funds to meet national or local priorities
**Assessment**

This unit is externally assessed and requires candidates to produce a report based on a coursework assignment, 10 hour duration and set by WJEC. It is recommended that the work is limited to 2000 words.

Work should include evidence of the following:

(a) Aims and investigation.

(b) Research and analysis of data.

(c) Evaluation to include:

   (i) Procedures used to collect data.
   (ii) Findings of the study.

The work is marked out of 100 and is assessed by WJEC.

<table>
<thead>
<tr>
<th>Areas to be assessed</th>
<th>Max. Marks</th>
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<tbody>
<tr>
<td>Aims and investigation</td>
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<td>Research and analysis</td>
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<td>Evaluation</td>
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<td><strong>TOTAL</strong></td>
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Unit 8: Understanding Human Behaviour

Introduction

This A2 unit is a mandatory unit that will be externally assessed.

Through the study of this unit, candidates will gain knowledge and understanding of the influences that can affect human development and the concepts and theories that can be used to explain human behaviour within different care settings.

The content of this unit includes the:

- Factors that influence an individual's development
- Theories of human development
- Applications of the psychological theories to understand the behaviour of different individuals within a range of care settings
- Strategies associated with the theories

Content

8.1 Factors that influence an individual's development

Candidates will need to know and understand how the following factors can influence an individual's physical, intellectual, emotional and social development:

- Inheritance – genetics, chromosomal influences, genotypes, phenotypes and maturation, individual and group differences
- Environment – location, level of employment/unemployment, pollution, level of crime
- Socio-economic – family, education, diet, income, occupation, social class, housing, culture, access to health services
- Psychological – developing a sense of self, self-concept, self-esteem, parental / peer approval and interaction.

Candidates will need to have knowledge and understanding of how different influences can interact to affect an individual's development. This will include reference to the nature/nurture debate.
8.2 Theories of human development

Candidates will need to know and understand the following approaches to development:

- **Psychodynamic:** importance of the unconscious mind, the importance of early experiences; Freud, Erikson, Bowlby, Rutter
- **Humanistic:** the individuals interaction with their social and physical environment; Rogers, self actualisation; Maslow
- **Behaviourist:** role of reinforcement, conditioning, Pavlov, Skinner
- **Cognitive:** Piaget stages of development; social interaction and language; Vygotsky
- **Social learning:** effects of others, groups, culture and society on behaviour, self fulfilling prophecy, role theory; Bandura
- **Biological:** maturation theory, genetic influences; Eysenck, Cattell, Gessell

8.3. Applications of the psychological theories to understand the behaviour of different individuals within a range of care settings

Candidates will need to know how the theories enable care workers to help individuals on a day-to-day basis within the following care settings:

- Pre-school care and educational settings – crèche, day nursery, mother and toddler sessions, playschools, child minders
- Day care settings for individuals with disabilities and other individuals – day centres
- Residential settings – residential and nursing homes, sheltered housing facilities

8.4 Strategies associated with the theories

Candidates will need to know how the following strategies and treatments can be used to meet the needs of individuals:

- Psychoanalysis and play therapy
- Person-centred therapy and encounter groups
- Behaviour therapy, behaviour modification, token economy, time management for stress
- Simple and complex sensory motor, verbal and imaginative play with peers and adults; cognitive behavioural therapy
- Modelling, social skills training and family therapy
- Physical/Biological treatments – drugs, meditation and relaxation, sensory rooms

Assessment

Assessment for this unit will be through an external examination based on the content of the unit. There will be one examination (2 hours).

Candidates will be required to respond to short-answer questions and structured free response questions drawn from topics detailed in the content of the unit.

Candidates will be expected also to apply their knowledge and understanding to given scenarios and data by evaluating evidence and making reasoned judgements and conclusions.
Unit 9: Working in Health and Social Care

Introduction

This A2 unit is an optional unit that will be internally assessed.

The aim of this unit is to help candidates prepare for employment within the areas of health, social care and children’s services. It will enable them to reflect on their own suitability for employment in different job roles, and will also provide opportunities to build on their knowledge and understanding of caring skills/techniques.

The content of this unit includes:

- The main employment sectors in health, social care and children’s services
- Job roles of practitioners
- The qualifications and skills needed by practitioners
- Caring skills and techniques to meet the needs of individuals

Content

9.1 The main employment sectors in health, social care and children’s settings

Candidates will need to have knowledge and understanding of the many employment opportunities in health, social care and children’s services within the different sectors:

- The Statutory sector – NHS, Local Authority provision i.e. Social Services and Education (Early years and provision for special needs)
- The Independent (Private) sector – providers who operate services on a profit / non-profit making basis e.g. BUPA, nursing homes, crèches
- The Voluntary sector – e.g. Age Concern, Barnado’s

They should also consider the factors that might influence the availability of job opportunities on a national and local basis. These include:

- The political and economic situation
- New technological developments
- Demographic factors
9.2 Job roles of practitioners

Candidates will need to gain knowledge and understanding of the wide variety of jobs and specialist roles within health, social care and children’s services to include:

- Main duties and responsibilities of workers – day-to-day work and typical job description, level of responsibility and autonomy
- Conditions of employment – pay, incremental pay increases, overtime, pension rights, work patterns / shifts, holiday entitlement
- Job satisfaction – job security, promotion opportunities, working environment, continuous professional development and training
- Working within multi-disciplinary teams – the benefits and possible drawbacks for individuals and practitioners of working within teams / in partnership

9.3 The qualifications and skills needed by practitioners

Candidates should know:

- The main routes into employment in these sectors e.g. academic, vocational and occupational
- Entry requirements
- Personal qualities e.g. honesty, trustworthiness, commitment, reliability
- Skills – Effective communication skills
  - IT skills
  - Ability to work independently and as part of a team
  - Ability to make decisions and supervise others
  - Specific skills related to job roles e.g. ability to drive

9.4 Caring skills and techniques to meet the needs of individuals

Candidates will need to assess how practitioners use the following caring skills / techniques and effective communication in their job roles:

- Encouraging
- Showing approval
- Creating trust
- Gaining compliance
- Social perception
- Observation
- Disengagement
- Distraction
- Physical contact
- Modelling
- Working alongside
- Setting challenges
- Safe working practices
Assessment

This unit is internally assessed and requires candidates to produce a report based on a study of two different job roles within the health, social care and children's services.

Introduction and Aims

This should include:

- Aims
- The employment sectors in health, social care and children's services
- The range of job roles within these services
- The selection and description of the two chosen job roles

Main body of report

Through both primary and second research report on:

- Roles and function of selected job roles
- Personal qualities/skills/training
- The related employment opportunities both locally and nationally
- Collection and interpretation of feedback from practitioners

Evaluation

This should include:

- The success of the report in meeting set aims
- The suitability of the procedures used for collecting data
- Comparison of the two job roles
- Self evaluation – suitability for working in the chosen job roles
- Suggestions for improvement
<table>
<thead>
<tr>
<th><strong>Unit 9: Working in Health and Social Care</strong></th>
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<td><strong>Assessment evidence:</strong></td>
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<td>Candidates are required to produce a report based on a study of two different job roles within health, social care and children's services. The evidence should include:</td>
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<tr>
<td><strong>AO1:</strong> Understanding of the employment sectors in health, social care and children’s services and the factors that influence the availability of jobs.</td>
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<td><strong>AO2:</strong> Descriptions of two different job roles that shows understanding of the main duties of practitioners, conditions of employment, qualifications / training, personal qualities and skills needed.</td>
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<td><strong>AO3:</strong> Relevant primary and secondary research to investigate two different job roles and determine the views and perception of practitioners, regarding their job roles, and the extent to which it meets their personal needs.</td>
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<td><strong>AO4:</strong> Evaluation of the two job roles to include a comparison of practitioner responses with the secondary information gathered about job roles, and self-evaluation to assess the candidate's own suitability for working in these job roles.</td>
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Unit 10: Care of Older Individuals

Introduction

This A2 unit is an optional unit that will be internally assessed.

This unit aims to broaden knowledge and understanding of the ageing process and the provision of local services available for older individuals. The unit will focus on how the physical, intellectual, emotional and social needs of older individuals are met through care provided by both formal and informal care providers.

The content of this unit includes:

- Physical and cognitive effects of ageing
- Impact of social, emotional and economic factors on ageing
- Care and support services for older individuals
- Access and barriers to services
- Role of professional care workers
- Rights and protection for older individuals

Content

10.1 Physical and cognitive effects of ageing

Candidates should know and understand how the body is affected by the ageing process and how it may impact on daily life.

This should include:

- The biological theories of ageing - including Erikson’s psychosocial theory; social disengagement theory; activity theory
- Conditions and diseases affecting the heart and circulation – including loss of efficiency, heart disease, raised blood pressure and cholesterol, heart attack and dysfunction, sclerosis
- Disorders of the respiratory system – including breathlessness, bronchitis, emphysema, COPD (Chronic Obstructive Pulmonary Disease)
- Sensory impairments – including degeneration of vision and hearing
- Musculo-skeletal disorders – including rheumatism, osteoarthritis, rheumatoid arthritis, osteoporosis, loss of elasticity in the skin
- Conditions and diseases affecting the nervous system – including stroke, dementia and Alzheimer’s disease, Parkinson’s disease
- Other debilitating conditions - Type 2 diabetes, incontinence, communication difficulties, confusion and obesity
10.2 Impact of social, emotional and economic factors on ageing

Candidates should understand how the following factors associated with ageing could have both positive and negative effects on the quality of life of older individuals.

These include:

- **Social factors** – isolation, inadequate / inappropriate housing, lack of occupation, lack of social contact / support, transport difficulties, increased dependency due to changes in health and care needs, leisure activities, cultural trends and beliefs, attitudes of society towards older individuals, time to pursue leisure activities and travel, taking part in community life, spending time with grandchildren / family
- **Emotional factors** – loss of confidence, anxiety and depression, bereavement
- **Economic factors** – decreased income, risk of poverty, benefits for older individuals

10.3 Care and support services for older individuals

Service provision

Older people often need increased access to health and social care services and facilities. Candidates should know and understand the current pattern of provision of health and care services for older individuals in their local area.

This includes:

- **Formal Provision** – through statutory, private / independent and voluntary providers, including
  - Health Care: GP provision; hospital services; chiropody; physiotherapy; occupational therapy; community health, intermediate care, rehabilitation, palliative care, specialist health care equipment and transport, nursing care in care homes or other settings, mental health services
  - Social Care: sheltered housing; residential care; nursing home care; day care; home care; assessment of needs / care management, respite care, provision of meals, aids / adaptations, transport, mental health services, welfare benefits, leisure services
  - Informal Provision – the support provided for individuals by family, friends, neighbours and local support groups

Candidates should understand the merits of both types of services and how informal carers support the work of formal providers. They should know and understand how joint service planning enables individuals to receive a range of support services tailored to meet individual needs.
10.4 Access and barriers to services

Candidates should know that individuals have certain rights to access health care services but may need to apply for some social care services.

Candidates need to know and understand the:

- Ways of accessing services and facilities, including methods of referral, eligibility criteria, assessment of needs
- Barriers faced by individuals when accessing services, including geographical; physical; psychological; financial; resource barriers and accessibility of information
- Cost of services – services that are free at the point of delivery, the use of means testing for services, meeting eligibility criteria

10.5 Role of professional care workers

Candidates need to have knowledge and understanding of the main health and social care professionals, their main role and where they are located.

These include:

- Health care professionals – GP, consultant geriatrician, community nurse, health visitor, optician, dentist, chiropodist, physiotherapist, occupational therapist, continence advisor, community psychiatric nurse
- Social care professionals – social worker, care manager, care worker, home care workers, day centre / support workers

Candidates should also understand the valuable support provided by volunteers in a variety of settings e.g. charity shops, help lines, befriending or visiting older individuals, providing transport.

10.6 Rights and protection for older individuals

Candidates need to know how the rights of older individuals can be protected in law. They should understand the impact of the following legislation on the care of older individuals:

- NHS and Community Care Act 1990
- Care Standards Act 2000
- The Carers (Recognition and Services) Act 1995
- The Mental Health Act 1983
- Health Act 1999

Candidates should understand the importance of the National Service Framework for older individuals.
Assessment

This unit is internally assessed and requires candidates to produce an in-depth case study based on the effects of ageing and the resulting care needs for one older individual.

They should investigate how formal health and social care services and informal care meet the needs of the chosen individual.

Introduction

- Aims and objectives
- Theories of the ageing process
- Effects of ageing – both physical and cognitive

Case Study (the confidentiality of the individual must be maintained)

- Choice of older individual and the effects of age related conditions on his/her daily life
- The effects of social, economic and emotional factors on the individual
- The services used by the individual both formal and informal
- Analysis of information collected

Evaluation

- Meeting the aims of the report
- Assessment and evaluation of the services received, in meeting the needs of the individual and how these could be improved
- Ethical issues related to the study
- Appropriateness of the procedures used and suggestions for improvements
# Unit 10: Care of Older People

## Assessment evidence:
Candidates are required to produce an in-depth case study of the effects of ageing on one older individual who requires a high level of support from health and/or social care services.

<p>| AO1: Knowledge and understanding of the ageing process and its effects on older individuals, including a detailed description of the age related conditions affecting the chosen individual. |
| AO2: Application of knowledge and understanding of the chosen individuals by assessing the impact of ageing on their daily lives and how this is affected by social, economic and emotional factors. |
| AO3: Relevant research and analysis to investigate the help and support provided through local service provision and informal care for the chosen individual. |
| AO4: Evaluation of how well the needs of the individual have been met and the effectiveness of service provision delivered. |</p>
<table>
<thead>
<tr>
<th>Assessment Objective</th>
<th>Level of Achievement 1</th>
<th>Level of Achievement 2</th>
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<td>• Outline some factors of physical ageing.</td>
<td>• Describe the more obvious physical and cognitive changes that occur during the ageing process.</td>
<td>• Give a detailed description of the physical and cognitive changes that occur during the ageing process.</td>
<td>• Give a detailed explanation of the physical and cognitive changes that occur during the ageing process in relation to the different theories of ageing.</td>
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<td>• Identify age-related conditions affecting the individual.</td>
<td>• Give a basic description of the age related conditions affecting the individual.</td>
<td>• Outline the basic theories of ageing.</td>
<td>• Give a thorough description of the age related conditions affecting the individual.</td>
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<td>Evidence at this level will have significant omissions and inaccuracies. No use of technical vocabulary.</td>
<td>Evidence at this level will have some significant omissions and inaccuracies, with limited synthesis of gathered information. Little use of technical vocabulary.</td>
<td>Evidence at this level will show greater depth of understanding and accuracy with effective synthesis of gathered information. Technical vocabulary used with few inaccuracies.</td>
<td>Evidence at this level will show a high level of understanding and accuracy with effective synthesis of gathered information. Accurate use of technical vocabulary with no irrelevant information.</td>
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<td>- Identify the effects of age related conditions on the chosen individual.</td>
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<td>- Briefly describe the effects of economic and emotional factors on the individual.</td>
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<td>Evidence at this level conveys very little meaning with no use of specialist vocabulary.</td>
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<td>- Describe the effects of age related conditions on the daily life of the chosen individual.</td>
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<td>- Show some application of knowledge and understanding to describe the effects of social, economic and emotional factors on the individual.</td>
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<td>Evidence at this level will be written in a manner that conveys meaning but lacks the use of specialist vocabulary.</td>
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<td>- Explain the effects of age related conditions on the daily life of the chosen individual.</td>
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<td>- Show greater application of knowledge and understanding to describe the effects of social, economic and emotional factors on the individual.</td>
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<td>Evidence at this level will be written in a manner that clearly conveys meaning, using some specialist vocabulary, and showing effective synthesis of information to describe and explain the physical and social effects of age related conditions on the individual, taking into account the factors affecting their daily life.</td>
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<td>- Identify two local services providing support for the individual.</td>
<td>- Use a narrow range of sources to investigate local provision for the individual.</td>
<td>- Use a range of sources to investigate local provision for the individual.</td>
<td>- Use a wide range of appropriate sources to investigate local provision for the individual.</td>
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<td>- Describe any informal care available for the individual.</td>
<td>- Carry out interviews to determine the type of informal care received by the individual.</td>
<td>- Design questionnaire and carry out interviews to determine the type of informal care received by the individual.</td>
<td>- Design questionnaires and carry out well structured interviews to determine the type of informal care received by the individual.</td>
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<td>- Demonstrate some skills in analysing some of the information gathered to produce a report that describes the effects of ageing and outlines the services used by the individual.</td>
<td>- Demonstrate a satisfactory level of skills in analysing the information gathered to explain the effects of ageing and describes the services used by the individual.</td>
<td>- Demonstrate a high level of skill in analysing the information gathered to provide a detailed explanation of the effects of ageing and describes, in detail, the services used by the individual.</td>
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<td>- Make reference to ethical issues to be considered.</td>
<td>- Describe ethical issues related to the study.</td>
<td>- Show a thorough understanding of how ethical issues could affect the study.</td>
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<td>Evidence at this level is limited, showing no planning, observational skills or ethical considerations.</td>
<td>Evidence at this level may be limited, showing a lack of organisational skills and planning, with little or no regard to ethical considerations.</td>
<td>Evidence at this level will reflect effective planning and organisational skills with some evidence of ethical considerations. Work will be well ordered with few omissions / inaccuracies.</td>
<td>Evidence at this level will reflect detailed, thorough planning, showing systematic organisational skills, ethically correct procedures and no inaccuracies. Work will be detailed, but concise and well ordered.</td>
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<td>- Describe how the needs of the individual have been met.</td>
<td>- Evaluate some of the evidence to assess how well the needs of the individual have been met through service provision and informal providers.</td>
<td>- Evaluate most of the evidence to assess how well the needs of the individual have been met through service provision and informal providers.</td>
<td>- Evaluate all of the evidence to assess how well the needs of the individual have been met through service provision and informal providers.</td>
</tr>
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<td></td>
<td>- Identify the strengths of the services delivered.</td>
<td>- Give some consideration to the effectiveness of services delivered through joint service planning and the influence of the National Framework for Older People.</td>
<td>- Give detailed consideration to the effectiveness of services delivered through joint service planning and the influence of the National Framework for Older People.</td>
<td>- Give thorough consideration to the effectiveness of services delivered through joint service planning and the influence of the National Framework for Older People.</td>
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<td>Evidence at this level conveys very little meaning with no use of specialist vocabulary.</td>
<td>Evidence at this level will lack detail and contain serious omissions.</td>
<td>Evidence at this level will be in greater depth, containing few omissions</td>
<td>Evidence at this level will be detailed but comprehensive with no omissions</td>
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Unit 11: The Role of Complementary Therapies in the Care of Individuals

Introduction

This A2 unit is an optional unit that will be assessed internally.

The aim of this unit is to provide candidates with the opportunity to explore the use of a range of complementary therapies and how they can be used holistically to support conventional therapies.

The content of this unit includes:

- Definitions of complementary therapies
- Classification of complementary and alternative therapies
- Meeting the needs of individuals
- Settings that provide complementary therapies
- Roles of practitioners involved in complementary therapy
- Current trends and opinions regarding the use of complementary therapies

Content

11.1 Definitions of complementary therapies

Candidates should understand the key terms used in describing therapies and the concepts associated with their practice.

This includes:

The historical perspective of complementary therapies – including the use of traditional remedies, their underlying philosophy and the principles on which they work.

- The differences between conventional (orthodox) therapies i.e. those based on evidence-based medicine; complementary therapies i.e. additional therapies used by patients who are receiving conventional therapies / treatment; and alternative therapies i.e. therapies which are used instead of conventional treatments.
- The concept of holism – the holistic approach to health and well-being where, not only a patient’s physical or physiological symptoms are treated, but also their emotional and spiritual feelings are considered as part of the treatment.
11.2 Classification of complementary and alternative therapies

Candidates should understand that there are different ways of categorising therapies and therapies may fit into more than one category.

These include:

- Physical – therapies that work on the body's physiological system to release endorphins or to promote circulatory systems and bring about a feeling of well-being e.g. massage, chiropractic, acupuncture, reiki, reflexology
- Expressive/ Creative – therapies where people are encouraged to express their emotions e.g. art therapy, music therapy
- Cognitive/ Intellectual – therapies that promote healing through the use of positive thought e.g. hypnotherapy, meditation
- Sensory – therapies that work with the senses e.g. aromatherapy, colour therapy, Bach flower therapy
- Medical systems – therapies that use non-traditional medicines e.g. Traditional Chinese medicine, homeopathy
- Diagnostic – for example, iridology

11.3. Meeting the needs of individuals

Candidates need to understand how complementary therapies can be used to meet the needs of individuals who may have physical, emotional and/or social conditions including:

- Acute pain
- Chronic conditions e.g. asthma, headaches, back pain, nerve / muscular pain, arthritis, multiple sclerosis
- Emotional needs e.g. depression, anxiety, stress, panic-attacks
- Addiction e.g. smoking, alcohol, drugs
- Allergies e.g. skin problems, itching
- Emotional needs e.g. phobias, nail biting
- Diet related disorders

11.4 Settings that provide complementary therapies

Candidates will need to have knowledge and understanding of:

- How complementary therapies may be accessed – over-the-counter remedies, private practitioners, NHS, integrated practitioners.
- The different settings that provide complementary therapies – leisure centres, clinics, health spa, hospices, workplace, health centres, hospital outpatient services, schools for children with disabilities, voluntary organisations, own home or therapist’s home
- The availability of complementary therapies in the local area
- The comparative cost of complimentary therapies
11.5 Roles of practitioners involved in complementary therapies

Candidates will need to investigate:

- The type and duration of training available for practitioners and the qualifications needed to practice
- Statutory regulation related to CAMs and the use of NOS (National Occupation Standards) in the provision of services
- The role of national professional bodies involved in the provision of CAM's e.g. GCC (General Chiropractic Council) and the HPC (Health Professions Council)
- Health and Safety regulations relating to CAM's

11.6 Current trends and opinions relating to the use of complementary therapies

Candidates will need to investigate current trends and opinions concerning the use of complementary therapies to include:

- The stereotypical image of the use of complementary therapies
- Current medical and public opinions
- Controversial aspects relating to the use of complementary therapies
- The role of complementary therapies alongside conventional treatments
Assessment

This unit is internally assessed and requires candidates to produce a written report on a study of two complementary therapies and investigate how they meet the needs of two individuals with differing needs. Research will also encompass the views of health professionals and the public.

Introduction

- Aims and objectives
- The purpose and range of complementary therapies
- The settings

Main body of report

- Choice of individuals – their physical, emotional and/or social needs
- The therapy treatment received and the influence on the individuals lifestyle, health beliefs and attitudes
- Job roles of practitioners involved – their training, health and safety requirements, regulatory bodies and requirements
- Views and opinions of individuals requiring treatment, public and health professionals
- Analysis of information collected

Evaluation

- Success at meeting the aims and objectives
- Assessment and evaluation of the complementary therapies using a variety of sources – individuals receiving treatment, self, public and health professionals
- Suggestions for improvements and possible development
### Unit 11: The Role of Complementary Therapies in the Care of Individuals

**Assessment evidence:**
Candidates are required to produce a report based on a study of two individuals who use two different complementary therapies to meet differing needs. The evidence should include:

<p>| AO1 | Knowledge and understanding of the development, use and purpose of complementary therapies and the settings that provide them. |
| AO2 | Information and knowledge related to the chosen individuals that shows understanding of the suitability and use of two different complementary therapies in meeting their differing needs, including information on the roles of the practitioners involved. |
| AO3 | Relevant research and analysis to determine the views and opinions of health professionals and the general public regarding the use of complementary therapies. |
| AO4 | Evaluation of how well the complementary therapies have worked alongside conventional or other treatments in meeting the needs of the chosen individuals. |</p>
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<th>Assessment Objective</th>
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<td>- Identify different types of complimentary therapy.</td>
<td>- Give a basic description of the difference between conventional, complementary and alternative therapies and how they have developed.</td>
<td>- Give a detailed description of the difference between conventional, complementary and alternative therapies and how they have developed.</td>
<td>- Give a detailed, but concise, description of the difference between conventional, complementary and alternative therapies and how they have developed.</td>
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<td>- Identify some of the settings where complimentary therapies are available.</td>
<td>- Briefly describe the role of complimentary therapies alongside conventional treatments.</td>
<td>- Describe the role of complimentary therapies alongside conventional treatments.</td>
<td>- Describe in greater depth the role of complimentary therapies alongside conventional treatments.</td>
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<td>- Describe the use and purpose of some complimentary therapies (including those used by the individuals), and identify some of the settings where they are available.</td>
<td>- Describe the use and explain the purpose of a range of complementary therapies (including those used by the individuals), and describe a good range of settings where they are available.</td>
<td>- Fully describe the use and explain the purpose of a range of complementary therapies (including those used by the individuals), and gives a comprehensive range of settings where they are available.</td>
<td>- Give a detailed, but concise, description of the difference between conventional, complementary and alternative therapies and how they have developed.</td>
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<td>Evidence at this level will have a wide range of omissions and inaccuracies. No technical vocabulary will be used.</td>
<td>Evidence at this level might have some significant omissions and inaccuracies, with limited synthesis of gathered information. Little technical vocabulary will be used.</td>
<td>Evidence at this level will show greater understanding and accuracy, with some evidence of synthesis of gathered information, outlining the similarities and differences in therapies. Technical vocabulary will be used with few inaccuracies.</td>
<td>Evidence at this level will show a high level of understanding and accuracy, with evidence of effective synthesis of gathered information, describing the similarities and differences in therapies and their holistic aspects. Technical vocabulary will be accurate, with no irrelevant information.</td>
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<td>• Identify the physical needs of the individuals.</td>
<td>• Identify the basic aims of the study.</td>
<td>• Present detailed aims of the study.</td>
<td>• Present detailed and realistic aims of the study.</td>
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<td>• Outline the reasons why only the chosen therapies are suitable for the individuals.</td>
<td>• Identify and briefly describe the needs of two individuals, though the evidence might focus on physical needs with little consideration of emotional/social needs.</td>
<td>• Identify and describe in detail the needs of two individuals, including their physical, emotional and social needs.</td>
<td>• Show their understanding of the holistic needs of the two individuals by considering their physical, social and emotional needs.</td>
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<td>• Provide an outline of two practitioners roles.</td>
<td>• Provide a basic explanation of why each therapy is suitable for each of the individuals, showing some links to the lifestyle, beliefs and attitudes of both individuals.</td>
<td>• Give a detailed description of the job roles of the practitioners involved, including the qualifications / training required, health and safety requirements, special qualities and regulatory requirements.</td>
<td>• Provide a thorough explanation of why each therapy is suitable for the individuals, analysing how their lifestyle, beliefs and attitudes have influenced their choice of therapy.</td>
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<td>Evidence will lack meaning and detail. No use of specialist vocabulary and will contain inaccuracies.</td>
<td>Evidence will convey meaning but will lack detail, with little use of specialist vocabulary and some inaccuracies.</td>
<td>Evidence will clearly convey meaning, be largely relevant and use specialist vocabulary with few inaccuracies.</td>
<td>Evidence will clearly convey meaning, with no irrelevant information and use specialist vocabulary accurately.</td>
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<td>- Present limited evidence of the views of the public towards complimentary therapies.</td>
<td>- Undertake primary research, using a suitable sample to determine the views and opinions of the general public. There will be little or no explanation for the sample used or how valid, biased or reliable the research is.</td>
<td>- Undertake primary research, using a suitable sample to determine the views and opinions of the general public. There will be some justification of the sample used and a basic explanation of how valid, biased or reliable the research is.</td>
<td>- Undertake primary research, using a suitable sample, to determine the views and opinions of the general public. There will be justification of the sample used and advantages / disadvantages of sampling methods given. There will be an explanation of how valid, biased or reliable the research is with suggestions for improvements / areas of further research.</td>
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<td>- Present limited evidence of the views of professionals towards complimentary therapies.</td>
<td>- Provide evidence, using a limited range of sources of information, to determine the views and opinions of healthcare professionals regarding the use of complementary therapies.</td>
<td>- Provide evidence, using a range of sources of information, to determine the views and opinions of healthcare professionals regarding the use of complementary therapies.</td>
<td>- Provide evidence, using a wide range of sources of information, to determine the views and opinions of healthcare professionals regarding the use of complementary therapies.</td>
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<td>- Attempt to analyse the results to draw some comparisons in the views and opinions of the general public and healthcare professionals.</td>
<td>- Analyse the results to draw comparisons between the views and opinions of the general public and healthcare professionals and also between different members of the public e.g. male/female, age groups, social status. Comparisons may be made between healthcare professionals according to gender, age and occupation.</td>
<td>- Analyse the results thoroughly to draw comparisons between the views and opinions of the general public and healthcare professionals and also between different members of the public e.g. male/female, age groups, social status. Comparisons may be made between healthcare professionals according to gender, age and occupation. Results should also be compared with the stereotypical view of complementary therapies.</td>
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Evidence at this level will lack meaning and detail. No use of specialist vocabulary and will contain inaccuracies.

Evidence will convey meaning but will lack detail. Little use of specialist vocabulary. The work may contain inaccuracies.

Evidence at this level will be structured clearly to communicate meaning. Technical vocabulary will be used accurately. The work will contain relatively few errors.

Evidence at this level well structured and clearly expressed. Specialist terms will be used with ease and accuracy. Work will be largely error free.

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<td>• Identify the strengths of the study.</td>
<td>• Identify the strengths and weaknesses of the evidence.</td>
<td>• Describe the strengths and weaknesses of the evidence in meeting the aims and objectives of the study giving some suggestions for improvement.</td>
<td>• Explain the strengths and weaknesses of the evidence in meeting aims and objectives of the study with valid and realistic suggestions for improvement and development.</td>
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<td>• Discuss how the complimentary therapies have met the needs of the two individuals.</td>
<td>• Produce an evaluation, based largely on the views of the two individuals studied, of how well the complementary therapy and conventional treatments used have met the needs.</td>
<td>• Produce an evaluation that takes into account the lifestyle, beliefs and attitudes of the two individuals, of how well the complementary therapy and conventional treatments used have met their needs.</td>
<td>• Produce an evaluation that takes into account the lifestyle, beliefs and attitudes of the two individuals, of how well the complementary therapy and conventional treatments used have met their needs.</td>
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<td>Evidence of this level will lack meaning and detail. No use of specialist vocabulary and will contain inaccuracies.</td>
<td>Evidence will convey meaning but will lack detail. Little use of specialist vocabulary. The work may contain inaccuracies.</td>
<td>Evidence at this level will be structured clearly to communicate meaning. Technical vocabulary will be used accurately. The work will contain relatively few errors.</td>
<td>Evidence at this level well structured and clearly expressed. Specialist terms will be used with ease and accuracy. Work will be largely error free.</td>
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Introduction

This A2 unit is an optional unit and is internally assessed.

The aim of the unit is to increase the knowledge and understanding of a range of different aspects relating to the diet and fitness of individuals at different life stages.

The content of this unit includes:

- The main nutrients in food – their source and function
- The positive effects of physical activity on the physical, psychological/mental and social health of individuals
- Current dietary and physical activity guidelines initiated to promote the health of the nation
- Role of a healthy diet and regular physical activity on the prevention/regulation of certain diseases
- Designing suitable diets and physical activity programmes for individuals

Content

12.1 The main nutrients in food – their source and function

Candidates will need to have knowledge and understanding of the main nutrients in food and their sources and dietary function:

- Macro-nutrients
  - Proteins – high and low biological value
  - Fats – saturated, monosaturated and polyunsaturated
  - Carbohydrates – starches and sugars

- Micro-nutrients
  - Vitamins – water soluble B and C, fat soluble A,D,E, and K
  - Minerals – calcium, iron, sodium, potassium and phosphorous

Candidates will also need to consider the importance of water and fluid intake and non-starch polysaccharide (NSP/dietary fibre).
12.2 The positive effects of physical activity on the physical, psychological/mental and social health of individuals

Candidates will need to have an understanding of the improvements regular physical activity and exercise can make to the following:

- **Physical Health** – e.g. fitness, muscular strength, flexibility, weight control, coronary heart disease, prevent indigestion, palpitations and muscular aches and pains, high blood pressure, osteoporosis and combat ageing by maintaining the body systems effectiveness.

- **Mental/Psychological Health** – e.g. improves mental alertness, motivation and interest in life, sense of well-being, stress relief, lowers anxiety levels, improve concentration span and sleeping patterns, raises self esteem, develops self confidence, ‘feel good factor’.

- **Social Health** – e.g. friendship network for sharing and support, exercise in groups contributes to the social well-being of individuals, avoids feelings of loneliness.

12.3 Current dietary and physical activity guidelines initiated to promote the health of the nation

Candidates will need to know the current dietary and physical activity guidelines generated by a range of agencies. The current United Kingdom Guidelines are stated in Saving Lives: Our Healthier Nation 1999 however there are many other agencies involved in promoting the health of individuals. These include:


- ‘Health Challenge’ Initiatives
12.4 Role of a healthy diet and regular physical activity on the prevention/regulation of certain diseases

Candidates should have knowledge relating to the beneficial effects of a healthy diet and regular physical activity on diseases and disorders. This should cover:

- Cardiovascular disease
- Stroke
- Diabetes
- Obesity and overweight
- Musculoskeletal health – Osteoporosis
- Hypertension
- Cancer – colon and post menopausal breast cancer, colorectal, and lung
- Dental caries
- Deficiency diseases – anaemia
- Irritable Bowel Syndrome

12.5 Designing suitable diets and physical activity programmes for individuals

Candidates should understand that when designing a diet and a physical activity programme, it is important to consider many factors to ensure the safe and effective execution of the programme. This includes:

- Assessing the diet of the individual before the start of the programme by use of nutritional tables or dietary analysis software to briefly analyse the nutritional content of the individuals diet and compare their intake with the recommended daily allowances
- Assessing the fitness level of the individual before the start of the programme by use of standardised tests and height/weight charts
- Considering safety factors when designing the programmes. In the physical activity programme the following factors should be considered – safe environment, inclement weather, suitable clothing, footwear and equipment, correct preparation – warm up and cool down. In the diet programme the following factors should be considered – general health of the individual, age related needs, principles of diet modification, availability and access to a range of foods
- Time available and the lifestyle choices of the individuals
- Suitability of programmes for intended purpose – aim of the programmes – e.g. weight loss, toning, reduce tension, increase fitness levels
- Acceptance of the programme by the individuals
- Appropriate monitoring methods:
  - Circulatory system – pulse, blood pressure (digital monitor)
  - Respiratory system – breathing rate, peak flow
  - Nervous system – temperature
  - Body functions – fitness testing, height/weight charts and BMI measurements
- Evaluating after the specified time scale – to include a reflection on the programmes and an analysis of the before and after programme results. The short and long term effects of the programmes should be identified with suggestions for change and improvements
Assessment

Candidates will need to produce a written report that examines the results of a specially designed diet and physical activity programme on two individuals for a minimum period of four weeks. The report will be based on primary and secondary research and the individuals should be at different life stages. Both individuals will follow a specifically designed diet and physical activity programme but one individual will have a programme that focuses on a dietary need whilst the other individual will have a physical activity/fitness need.

The report needs to include:

- A general introduction outlining details about the individuals. The aims and objectives of the investigation and methods of research – primary and secondary
- Knowledge and understanding about the requirement of a healthy diet and an outline of the current guidelines regarding diet and physical activity
- Knowledge and understanding about the possible benefits of exercise – effects on the physical health of an individual; effects on the mental/psychological health of an individual; aids the social health of an individual
- Information and knowledge regarding their chosen individuals by assessing their lifestyle choices, physical activities needs and consider their possible health outcomes in the future
- Relevant research and analysis when planning, designing, conducting and monitoring of the different programmes for the chosen individuals. Safety factors should be considered at this stage
- The programmes should include:
  1. Aims and objectives
  2. A description of the physical activities and the diet modifications to be undertaken
  3. Relevant safety factors
  4. Specified duration of time for the programmes
  5. Methods of monitoring
- Evaluation of the success and effectiveness of the diet and physical activity programmes in meeting the needs of the individuals. Make judgements about the possible short term and long term effects of the programmes on both individuals. Suggest possible improvements to both programmes and candidates should evaluate their own performance
**Unit 12: The Influences of Food and Fitness on Health and Well-being**

**Assessment evidence:**
Candidates are required to produce a written report examining the results of two programmes that concentrate on diet and fitness of two individuals at different life stages for a minimum period of four weeks.

<p>| AO1 | Knowledge and understanding of nutrients and the requirements of a healthy diet, exercise and its possible benefits. |
| AO2 | Compile profiles of two individuals – their lifestyle, diet, fitness level, disorders and diseases. |
| AO3 | Planning, designing, conducting and monitoring of a health and fitness programme for two individuals at different life stages. |
| AO4 | Evaluation of the success of the programmes in meeting the needs of individuals. The short and long term effects of the programmes and suggestions for improvements. Self evaluation – related to effectiveness in conducting the programmes. |</p>
<table>
<thead>
<tr>
<th>Assessment Objective</th>
<th>Level of Achievement 1</th>
<th>Level of Achievement 2</th>
<th>Level of Achievement 3</th>
<th>Level of Achievement 4</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>AO1</strong></td>
<td>The candidate will:</td>
<td>The candidate will:</td>
<td>The candidate will:</td>
<td>The candidate will:</td>
</tr>
<tr>
<td></td>
<td>• Identify the</td>
<td>• Identify and briefly describe</td>
<td>• Give a detailed explanation of the</td>
<td>• Give a thorough explanation of</td>
</tr>
<tr>
<td></td>
<td>requirements of a</td>
<td>the requirements of a healthy diet.</td>
<td>requirements of a healthy diet and its function within the body.</td>
<td>the requirements of a healthy diet demonstrating an understanding of its function.</td>
</tr>
<tr>
<td></td>
<td>healthy diet.</td>
<td>• Provide a basic explanation</td>
<td>• Provide a detailed explanation of the effects of exercise on the physical and psychological health of an individual.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>of the effects of exercise on an individual.</td>
<td>• Describe in detail a range of current guidelines designed to promote a healthy diet and to encourage physical activity.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Outline the requirements of at least two current guidelines regarding diet and physical activity.</td>
<td>• Give a detailed and comprehensive description of current guidelines designed to promote a healthy diet and appropriate and planned physical activity.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Evidence at this level will well structured and clearly expressed. Specialist terms will be used with ease and accuracy. Work will be largely error free.</td>
</tr>
</tbody>
</table>

Evidence at this level will lack meaning and detail. No use of specialist vocabulary and will contain inaccuracies.

(0 - 3 marks)

Evidence will convey meaning but will lack detail. Little use of specialist vocabulary. The work may contain inaccuracies.

(4 - 7 marks)

Evidence at this level will be structured clearly to communicate meaning. Technical vocabulary will be used accurately. The work will contain relatively few errors.

(8 - 11 marks)

Evidence at this level will be largely error free.
<table>
<thead>
<tr>
<th>Assessment Objective</th>
<th>Level of Achievement 1</th>
<th>Level of Achievement 2</th>
<th>Level of Achievement 3</th>
<th>Level of Achievement 4</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>AO2</strong></td>
<td>The candidate will:</td>
<td>The candidate will:</td>
<td>The candidate will:</td>
<td>The candidate will:</td>
</tr>
<tr>
<td></td>
<td>• Provide some evidence of the lifestyle, health and diet of two individuals.</td>
<td>• Provide information from, at least two sources, on the testing and measuring of activities related to diet and exercise.</td>
<td>• Provide detailed information from different sources, on the testing and measuring of activities related to lifestyle, diet and exercise.</td>
<td>• Provide detailed and comprehensive information from a range of sources on the testing, measuring and analysing of activities related to lifestyle, diet and exercise.</td>
</tr>
<tr>
<td></td>
<td>• Record the type of exercise taken by these individuals.</td>
<td>• Outline the profiles of two individuals with reference to their lifestyle, health, diet and exercise.</td>
<td>• Compile profiles of two individuals recording their lifestyle, diet, fitness level, disorders and diseases.</td>
<td>• Compile accurate profiles of two individuals with detailed recordings of their lifestyle, diet, fitness level, disorders and disease.</td>
</tr>
<tr>
<td></td>
<td>Evidence at this level will lack meaning and detail. No use of specialist vocabulary and will contain inaccuracies.</td>
<td>Evidence will convey meaning but will lack detail. Little use of specialist vocabulary. The work may contain inaccuracies.</td>
<td>Evidence at this level will be structured clearly to communicate meaning. Technical vocabulary will be used accurately. The work will contain relatively few errors.</td>
<td>Evidence at this level well structured and clearly expressed. Specialist terms will be used with ease and accuracy. Work will be largely error free.</td>
</tr>
<tr>
<td></td>
<td>(0 - 5 marks)</td>
<td>(6 -11 marks)</td>
<td>(12 -18 marks)</td>
<td>(19 - 25 marks)</td>
</tr>
<tr>
<td>Assessment Objective</td>
<td>Level of Achievement 1</td>
<td>Level of Achievement 2</td>
<td>Level of Achievement 3</td>
<td>Level of Achievement 4</td>
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<tr>
<td>AO3</td>
<td>The candidate will:</td>
<td>The candidate will:</td>
<td>The candidate will:</td>
<td>The candidate will:</td>
</tr>
<tr>
<td></td>
<td>• Identify the strengths and weaknesses of the health level of the two individuals.</td>
<td>• Carry out simple assessment of the health and fitness levels of two individuals.</td>
<td>• Provide an assessment of the health and fitness levels of two individuals using standardised fitness tests.</td>
<td>• Provide a detailed assessment of the health and fitness levels of two individuals using a range of standardised fitness tests.</td>
</tr>
<tr>
<td></td>
<td>• Present suggestions of how the individuals can improve their diet and health.</td>
<td>• Provide basic plans to improve the diet and physical activity of two individuals.</td>
<td>• Design appropriate and realistic programmes for the improvement of health and fitness for two individuals.</td>
<td>• Design appropriate, realistic and timed programmes for two individuals which relate to set targets and the improvement of their health and fitness.</td>
</tr>
<tr>
<td></td>
<td>• Provide some evidence of carrying out the changes to improve health and fitness.</td>
<td>• Provide evidence of carrying out simple health and fitness programmes for two individuals.</td>
<td>• Provide evidence of the implementation and monitoring of the programmes, using a variety of techniques.</td>
<td>• Provide evidence of the implementation and detailed monitoring of the programmes using range of techniques.</td>
</tr>
<tr>
<td></td>
<td>Evidence at this level will lack meaning and detail. No use of specialist vocabulary and will contain inaccuracies.</td>
<td>Evidence will convey meaning but will lack detail. Little use of specialist vocabulary. The work may contain inaccuracies.</td>
<td>Evidence at this level will be structured clearly to communicate meaning. Technical vocabulary will be used accurately. The work will contain relatively few errors.</td>
<td>Evidence at this level well structured and clearly expressed. Specialist terms will be used with ease and accuracy. Work will be largely error free.</td>
</tr>
<tr>
<td></td>
<td>(0 - 6 marks)</td>
<td>(7 - 14 marks)</td>
<td>(15 - 22 marks)</td>
<td>(23 - 30 marks)</td>
</tr>
<tr>
<td>Assessment Objective</td>
<td>Level of Achievement 1</td>
<td>Level of Achievement 2</td>
<td>Level of Achievement 3</td>
<td>Level of Achievement 4</td>
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<tr>
<td>AO4</td>
<td>The candidate will:</td>
<td>The candidate will:</td>
<td>The candidate will:</td>
<td>The candidate will:</td>
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<tr>
<td></td>
<td>- Record how the</td>
<td>- Evaluate some evidence</td>
<td>- Evaluate evidence</td>
<td>- Evaluate the range</td>
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<td></td>
<td>individuals responded</td>
<td>to assess how well the</td>
<td>gained to assess the</td>
<td>of evidence gained to</td>
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<td></td>
<td>to the changes in</td>
<td>programmes meet the</td>
<td>success of the</td>
<td>assess the success of</td>
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<td>diet and exercise.</td>
<td>needs of the</td>
<td>two programmes in</td>
<td>the two programmes in</td>
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<td></td>
<td>individuals.</td>
<td>meeting the needs of</td>
<td>meeting the needs of</td>
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<td>and provide a detailed</td>
<td>the individuals and</td>
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<td>explanation of the</td>
<td>provide a detailed</td>
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<td>short and long term</td>
<td>explanation of the</td>
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<td></td>
<td>benefits.</td>
<td>short and long term</td>
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<td></td>
<td>effects of the</td>
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<td></td>
<td></td>
<td>- Evaluate their own</td>
<td></td>
<td>programmes.</td>
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<td>performance in</td>
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<td>conducting the</td>
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<td>programmes.</td>
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<td>Make a suggestion for</td>
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<td></td>
<td>improvement.</td>
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<td></td>
<td>Evidence at this level</td>
<td>Evidence will convey</td>
<td>Evidence at this level</td>
<td>Evidence at this level</td>
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<td></td>
<td>will lack meaning and</td>
<td>meaning but will lack</td>
<td>will be structured</td>
<td>will well structured</td>
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<tr>
<td></td>
<td>detail. No use of</td>
<td>detail. Little use of</td>
<td>clearly to communicate</td>
<td>and clearly expressed.</td>
</tr>
<tr>
<td></td>
<td>specialist vocabulary</td>
<td>specialist vocabulary.</td>
<td>meaning. Technical</td>
<td>Specialist terms will</td>
</tr>
<tr>
<td></td>
<td>and will contain</td>
<td>The work may contain</td>
<td>vocabulary will be used</td>
<td>be used with ease and</td>
</tr>
<tr>
<td></td>
<td>inaccuracies.</td>
<td>inaccuracies.</td>
<td>accurately. The work</td>
<td>accuracy. Work will be</td>
</tr>
<tr>
<td></td>
<td>(0 - 6 marks)</td>
<td>(7-14 marks)</td>
<td>will contain relatively</td>
<td>largely error free.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>few errors.</td>
<td></td>
</tr>
</tbody>
</table>
Details of the assessment arrangements for each unit are given in the content section.

**Synoptic Assessment**

Synoptic assessment, testing candidates’ understanding of the connections between the different elements of the subject and their holistic understanding of the subject, is a requirement of all A level specifications. In the context of Health and Social Care this means:

Requiring candidates to make and use connections within and between units at AS and A2 by applying knowledge and skills in work related contexts.

Coursework is considered to be inherently synoptic due to the bringing together of knowledge to be applied in the activity and/or piece of research and by the use of a variety of skills.

Synoptic questions may incorporate concepts and ideas that are designed to be challenging for candidates. Such questions may provide credit for extra insight and appreciation of interrelatedness of different aspects of the subject and creativity of thought. Such answers are likely to be in relation to data response and extended answer questions.

**Quality of Written Communication**

Candidates will be required to demonstrate their competence in written communication in assessment units at both AS and A2 where they are required to produce extended written material.

Extended writing and quality of written communication will be assessed primarily through assessment objectives 3 and 4.

Mark schemes and assessment grids will, where appropriate, be constructed to allow for the presentation of coherent account, cogent argument, appropriate format, use of vocationally specific terminology and clarity.
Awarding, Reporting and Re-sitting

The AS Single Award qualification will be reported on a five-grade scale; A, B, C, D, and E.

The A level Single Award qualification will be reported on a six-grade scale of A*, A, B, C, D, and E.

The AS Double Award qualification will be reported on a nine-grade scale, AA, AB, BB, BC, CC, CD, DD, DE, EE.

The A level Double Award qualification will be reported on an eleven-grade scale; A*A*, A*A, AA, AB, BB, BC, CC, CD, DD, DE, EE.

Candidates who fail to reach the minimum standard for grade E are recorded as U (unclassified), and do not receive a certificate.

Individual unit results and the overall subject award will be expressed as a uniform mark on a scale common to all GCE qualifications. The grade equivalence will be reported as a lower case letter ((a) to (e)) on results slips, but not on certificates:

<table>
<thead>
<tr>
<th>Unit Grade</th>
<th>a</th>
<th>b</th>
<th>c</th>
<th>d</th>
<th>e</th>
</tr>
</thead>
<tbody>
<tr>
<td>UMS (max 100)</td>
<td>100-80</td>
<td>79-70</td>
<td>69-60</td>
<td>59-50</td>
<td>49-40</td>
</tr>
</tbody>
</table>

At A level Grade A* will be awarded to candidates who have achieved a Grade A in the overall A level qualification and who have also achieved a minimum UMS score (to be specified) in A2 units.

Candidates may re-sit units prior to certification for the qualification, with the best of the results achieved contributing to the qualification. Individual unit results, prior to certification of the qualification have a shelf-life limited only by the shelf-life of the specification.

Uniform marks awarded for each unit will be aggregated and compared to pre-set boundaries.

Uniform marks correspond to overall grades as follows:

**AS Single Award**

<table>
<thead>
<tr>
<th>Overall Grade</th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
</tr>
</thead>
<tbody>
<tr>
<td>UMS (200)</td>
<td>200-160</td>
<td>159-140</td>
<td>139-120</td>
<td>119-100</td>
<td>99-80</td>
</tr>
</tbody>
</table>

**AS Double Award**

<table>
<thead>
<tr>
<th>Overall Grade</th>
<th>AA</th>
<th>AB</th>
<th>BB</th>
<th>BC</th>
<th>CC</th>
<th>CD</th>
<th>DD</th>
<th>DE</th>
<th>EE</th>
</tr>
</thead>
</table>

**A Level Single Award**

<table>
<thead>
<tr>
<th>Overall Grade</th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
</tr>
</thead>
<tbody>
<tr>
<td>UMS (400)</td>
<td>400-320</td>
<td>319-280</td>
<td>279-240</td>
<td>239-200</td>
<td>199-160</td>
</tr>
</tbody>
</table>

**A Level Double Award**

<table>
<thead>
<tr>
<th>Overall Grade</th>
<th>AA</th>
<th>AB</th>
<th>BB</th>
<th>BC</th>
<th>CC</th>
<th>CD</th>
<th>DD</th>
<th>DE</th>
<th>EE</th>
</tr>
</thead>
<tbody>
<tr>
<td>UMS (800)</td>
<td>800-640</td>
<td>639-600</td>
<td>599-560</td>
<td>559-520</td>
<td>519-480</td>
<td>479-440</td>
<td>439-400</td>
<td>399-360</td>
<td>359-320</td>
</tr>
</tbody>
</table>
Key Skills are integral to the study of AS/A level Health and Social Care and may be assessed through the course content and the related scheme of assessment as defined in the specification. The following key skills can be developed through this specification at level 3:

- Communication
- Problem Solving
- Information and Communication Technology
- Working with Others
- Improving Own Learning and Performance

Mapping of opportunities for the development of these skills against Key Skills evidence requirement is provided in 'Exemplification of Key Skills for Health and Social Care', available on the WJEC website.
PERFORMANCE DESCRIPTIONS

The performance descriptions for AS and A2 Health and Social Care indicate the level of attainment characteristic of the A/B and E/U boundary candidates. They should be interpreted in relation to the content outlined in the specification; they are not designed to define that content. They give a general indication of the learning outcomes and levels of attainment likely to be shown by a representative candidate performing at each boundary. In practice, most candidates will show uneven profiles across the attainments listed, with strengths in some areas compensating in the award process for weakness or omissions elsewhere.

The requirement for all AS and A level specifications to assess candidates' quality of written communication will be met through all four assessment objectives.
## 7.1 AS Performance Descriptions

<table>
<thead>
<tr>
<th>AS Assessment Objective</th>
<th>Assessment Objective 1</th>
<th>Assessment Objective 2</th>
<th>Assessment Objective 3</th>
<th>Assessment Objective 4</th>
<th>Quality of written Communication</th>
</tr>
</thead>
</table>
| Candidates demonstrate relevant knowledge, understanding and skills. | Candidates apply knowledge, understanding and skills. | Candidates use appropriate research techniques to obtain information from a range of sources. They analyse work-related issues and problems. | Candidates evaluate evidence, make reasoned judgements and draw valid conclusions about work-related issues. | Candidates: | **A/B boundary performance description**
| Candidates: | a. demonstrate with few omissions, a depth of knowledge of the health and social care sector b. a depth of understanding of the functions of the health and social care sector c. a range of relevant work-related skills in a variety of situations in an effective manner. | | | Candidates: | a. undertake research using a range of techniques b. use a wide range of relevant information to analyse work-related issues and problems. | Candidates: | a. use written expression which *conveys appropriate meaning* *uses appropriate specialist vocabulary.* |
| Candidates: | a. demonstrate basic knowledge of the health and social care sector; there may be significant omissions b. show a basic understanding of the purposes of the health and social care sector c. demonstrate a limited range of work-related skills. | Candidates: | a. apply knowledge, understanding and skills with guidance to service user groups and familiar work-related contexts. | Candidates: | a. collect information on work-related issues using given techniques b. use a limited range of relevant information sources c. carry out some basic analysis of work-related issues and problems. | Candidates: | a. use written expression which *is adequate to convey meaning* *may be expressed in a non-specialist way.* |
| E/U boundary performance description | | | | | | |

Candidates: a. evaluate evidence to draw basic conclusions about relevant work-related issues.
### 7.2 A2 Performance Descriptions

<table>
<thead>
<tr>
<th>A2</th>
<th>Assessment Objective 1</th>
<th>Assessment Objective 2</th>
<th>Assessment Objective 3</th>
<th>Assessment Objective 4</th>
<th>Quality of written Communication</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Candidates demonstrate relevant knowledge, understanding and skills.</td>
<td>Candidates apply knowledge, understanding and skills.</td>
<td>Candidates use appropriate research techniques to obtain information from a range of sources. They analyse work-related issues and problems.</td>
<td>Candidates evaluate evidence, make reasoned judgements and draw valid conclusions about work-related issues.</td>
<td></td>
</tr>
</tbody>
</table>

**A/B boundary performance description**

Candidates:
- a. demonstrate in-depth knowledge of the health and social care sector
- b. show in-depth understanding of the functions of the health and social care sector
- c. demonstrate a range of work-related skills in a variety of situations in an effective manner.

Candidates:
- a. accurately and independently apply in-depth knowledge, understanding and skills to a wide range of work-related situations, relating these as appropriate to different contexts and service user groups.

Candidates:
- a. select and justify use of research and analytical techniques
- b. use a wide range of relevant information sources
- c. use the selected techniques and information to analyse work-related issues and problems.

Candidates:
- a. evaluate a range of evidence to draw and justify valid conclusions
- b. make well-reasoned judgements about relevant work-related issues.

Candidates:
- a. use written expression which
  - conveys appropriate meaning
  - uses appropriate specialist vocabulary.

**E/U boundary performance description**

Candidates:
- a. demonstrate basic knowledge of the health and social care sector
- b. show basic understanding of the purposes of the health and social care sector; there may be significant omissions
- c. demonstrate a limited range of work-related skills.

Candidates:
- a. apply knowledge, understanding and skills with guidance to service user groups and work-related contexts.

Candidates:
- a. undertake research into work-related issues, using given techniques
- b. use a limited range of relevant information sources
- c. use collected information to carry out a straightforward analysis of work-related issues and problems.

Candidates:
- a. evaluate evidence to draw basic conclusions about relevant work-related issues
- b. identify strengths and weaknesses of the evidence.

Candidates:
- a. use written expression which
  - is adequate to convey meaning
  - may be expressed in a non-specialist way.
8

INTERNAL ASSESSMENT GUIDELINES

8.1 Introduction

The schemes of internal assessment are designed to encourage candidates to develop a wide range of research methods and present them in a variety of ways. They should be engaged in activities across all aspects of the specification, which lend themselves to this in a school/college or work based situation. Secondary sources, such as simulations and published data should also be used to give candidates experience of research that they could not obtain for themselves. The aim of internally assessed units is to assess whether candidates can think as practitioners in a work-related situation.

8.2 Assessment of group work

- Candidates may need to work in groups to collect data in areas where safety considerations may preclude individual work. In such situations, it is important that the candidate produces a uniquely identifiable piece of work.

- It is recognised that there are instances where candidates are required to carry out tasks as part of a group and the group work skills are an integral part of the assessment requirements. In this case general guidance on group work is superseded by the specific requirements and instructions in the individual unit.

8.3 Supervision/Authentication

- Candidates’ work for assessment must be undertaken under conditions that allow the teacher to supervise the work and enable it to be authenticated. Work may take place out of the centre however sufficient work must be completed under supervision to allow for authentication of candidate’s whole work to be completed with confidence.

- The teacher responsible for the supervision of the candidate’s work will be required to certify, by completing the coversheet that the marks submitted were awarded in accordance with the specification and Instructions and Guidance for Teachers and that the work submitted is that of the candidate concerned. The type and degree of assistance given, should be noted in the comment column.

- Any material provided by the teacher, or researched from other sources, e.g. the internet, must be acknowledged in the candidate’s submission. It is accepted that certain parts of a candidate’s coursework may be taken from other sources where these are relevant and appropriate. This is perfectly acceptable as long as all such cases are clearly identified in the text and fully acknowledged.
8.4 Confidentiality

In completing work for units candidates may raise issues of confidentiality. The following advice and guidance is offered to candidates and teachers.

- Candidates must always seek the permission of individuals, preferably in writing, before interviewing them.
- Candidates must always make clear to individuals that the information they give may be read by others e.g. teachers and moderators.
- Candidates must not pass on the information obtained to anyone else other than to those for whom it is intended.
- Candidates must preserve the anonymity of the individuals by using fictitious names both for the individuals themselves and for other individuals referred to, and, where appropriate by changing place names or any other names and facts which might help to identify the individuals.
- Candidates must not record information about individuals which might have legal implications.

8.5 Internal Standardisation

Where more than one teacher is involved in teaching and assessing work, centres are required to ensure that internal standardisation has taken place. This may take a number of forms: marking of common folders using exemplar material provided by WJEC or the centre's own archive material; cross-marking tasks or sections as they are produced; re-assessment of a sample of folders from each group at the end of the course.

While on-going discussion of task-setting and assessment criteria is important to establish a consistent approach within the centre, it is recommended that one teacher takes responsibility for checking the reliability of the centre's rank order. The moderator will welcome evidence of internal standardisation. The finally agreed mark(s) must be clearly indicated.

The centre is required to send the assessment sample sheet confirming that the marking of the work has been standardised. If only one teacher has undertaken the marking, this person must sign the form.

If a candidate suffers from a disability that may have affected his/her work or has been absent due to illness for a prolonged period a request for special consideration should be submitted to WJEC at the appropriate time together with medical evidence.
8.6 External Moderation

In view of the weighting of internally assessed units and each being individually certificated, consultative moderators will be available to advise and support new centres in preparing and marking assessments. Centres wishing to do this are advised to contact WJEC by 30 October in the year preceding submission. This is not a requirement but contact with the moderator will be encouraged to ensure that the standardising process proceeds smoothly.

Dates will be published for the submission of unit marks to WJEC and samples of work to the moderator. Internal deadlines will need to allow for the completion of any internal standardisation. The sample required for moderation should be chosen by the centre using the formula found in the WJEC Internal assessment Manual. This is:

<table>
<thead>
<tr>
<th>Total number of candidates</th>
<th>Work to be submitted (Numbers relate to rank order)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 – 10</td>
<td>All</td>
</tr>
<tr>
<td>11 – 19</td>
<td>1st and every second (1, 3, 5, 7 etc)</td>
</tr>
<tr>
<td>20 – 29</td>
<td>1st and every third (1, 4, 7, 10 etc)</td>
</tr>
<tr>
<td>30 – 59</td>
<td>1st and every fourth (1, 5, 9, 13 etc)</td>
</tr>
</tbody>
</table>

WJEC reserves the right to ask for further samples or for the work of the centre’s whole entry. The moderation procedure may lead to some adjustment of the internally assessed marks for each candidate though not normally a change in rank order. The moderator will return the work directly to the centre as soon as possible after completing the moderation.

Each centre will be informed of the moderated marks awarded and receive a report from the moderator on each unit that covers the appropriateness of the tasks set, the application of criteria and marking standards and administration.

The candidates’ work is returned to the centre after the examination, however centres are asked to keep the work under locked conditions until the time for any appeal has elapsed.

The WJEC provides teachers with the opportunity to have dialogue with the Principal Examiners and Moderators at INSET provision.
NOTICE TO CANDIDATE

The work you submit for assessment must be your own.

If you copy from someone else, allow another candidate to copy from you, or if you cheat in any other way, you may be disqualified from at least the subject concerned.

Declaration by candidate

I have read and understood the Notice to Candidate (above). I have produced the attached work without assistance other than that which my teacher has explained is acceptable within the specification.

Candidate's signature: .......................................................... Date: ...........................................

Declaration by teacher

I confirm that the candidate’s work was conducted under the conditions laid out by the specification.

I have authenticated the candidate’s work and am satisfied that to the best of my knowledge the work produced is solely that of the candidate.

Teacher's signature: .......................................................... Date: ...........................................

...
Centre Name: __________________________________________ Centre Number: ___________
Candidate's Name: ___________________________________ Candidate's Number: ________

Please tick the unit.

<table>
<thead>
<tr>
<th>Unit</th>
<th>Assessment Objective</th>
<th>Max. mark</th>
<th>Cand. mark</th>
<th>Comment/Justification (if needed)</th>
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<tr>
<td>2</td>
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<td>3</td>
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<td>4</td>
<td>AO4</td>
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Total mark for unit 100
NOTICE TO CANDIDATE
The work you submit for assessment must be your own.
If you copy from someone else, allow another candidate to copy from you, or if you cheat in any other way, you may be disqualified from at least the subject concerned.

Declaration by candidate
I have read and understood the Notice to Candidate (above). I have produced the attached work without assistance other than that which my teacher has explained is acceptable within the specification.

Candidate's signature:  Date:
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Declaration by teacher
I confirm that the candidate’s work was conducted under the conditions laid out by the specification.
I have authenticated the candidate’s work and am satisfied that to the best of my knowledge the work produced is solely that of the candidate.

Teacher's signature:  Date:
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Centre Name: _______________________________  Centre Number: _____________
Candidate’s Name: __________________________________  Candidate’s Number: ______

Please tick the unit.

<table>
<thead>
<tr>
<th>Unit 9</th>
<th>Unit 10</th>
<th>Unit 11</th>
<th>Unit 12</th>
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<table>
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<th>Cand. mark</th>
<th>Comment/Justification (if needed)</th>
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Total mark for unit 100
A2 HEALTH AND SOCIAL CARE

Coursework Assignment

Candidate Name: ____________________________________________________________

Candidate Number: _________________________________________________________

Centre Name: ______________________________________________________________

Centre Number: _____________________________________________________________

Assignment Number: _________________________________________________________

NOTICE TO CANDIDATE
The work you submit for assessment must be your own.
If you copy from someone else, allow another candidate to copy from you, or if you cheat in any other way, you may be disqualified from at least the subject concerned.

Declaration by candidate
I have read and understood the Notice to Candidate (above). I have produced the attached work without assistance other than that which my teacher has explained is acceptable within the specification.

Candidate’s signature: ____________________________________________________ Date: ____________________________

Declaration by teacher
I confirm that the candidate’s work was conducted under the conditions laid out by the specification.
I have authenticated the candidate’s work and am satisfied that to the best of my knowledge the work produced is solely that of the candidate.

Teacher’s signature: ______________________________________________________ Date: ____________________________
Total number of candidates entered for this component:

Please tick one box.

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<th>Unit 3</th>
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<th>Unit 4</th>
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<th>Teaching Group</th>
<th>Centre Mark</th>
<th>Moderator's Mark</th>
<th>For office use only</th>
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Subject Teacher | Date | Moderator |
## A2 HEALTH AND SOCIAL CARE

### PORTFOLIO SAMPLE SHEET

Total number of candidates entered for this component:

- [ ]

Please tick one box.

- Unit 9
- Unit 10
- Unit 11
- Unit 12

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<th>Name of Centre</th>
<th>Centre Number</th>
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<th>Candidate’s Examination No.</th>
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<th>Teaching Group</th>
<th>Centre Mark</th>
<th>Moderator’s Mark</th>
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<th>Date</th>
<th>Moderator</th>
</tr>
</thead>
</table>

VGCE Health and Social Care Specification (2009-2010)/JD
31-03-14 ED