





Health and Social Care

Learning Journey

Intent · Implementation · Impact







Curriculum Intent

About 3 million people in the UK work in health and social care, that is equivalent to 1 in every 10 people. Demand for both health and social care is likely to continue to rise due to the ageing population, so it is sure to continue to play a key role in UK society. The demand for people to fill these vital jobs will continue to increase. The rationale at Parkside Community School is to provide a fluid and dynamic knowledge rich KS4 option curriculum, which gives students the ability to progress to KS5 and beyond. This course will help students to develop key transferable skills and knowledge such as self-evaluation and research skills.

Students will study how people grow and develop over the course of their lives from infancy to old age, and the factors that may affect this, such as major life events like marriage or parenthood. Students will analyse this impact from a positive and negative viewpoint, demonstrating empathy. They then apply this to a person of their choice as part of their assessment portfolio. Students will understand how people adapt to these changes and the local and national health and social care support that is available to them. Students will also research health and social care services in their local community. They will look at how people access the local health and social care services provided and the support that is given in the local community. Students will be given the opportunity to demonstrate and apply the key care values to scenarios. They will develop skills in measuring and interpreting data about someone's physiological health to design a care plan that will allow them to analyse and improve their health and wellbeing. Overall, students should be given the opportunity to self-reflect about choices they make and how they affect others.

Most students take part in relevant work experience during year 10. This is in a variety of setting such as pre-schools, primary schools and nursing homes. Students will find out about a range of careers, designed to raise aspirations. It is also my intention to develop key links with universities for all students. They will also be able to draw on the knowledge and skills acquired from other GCSE subjects where relevant. Students can use the knowledge and skills from GCSEs generally, giving them the opportunity to apply their academic knowledge to everyday and work contexts. Studying health and social care does not limit progression options because the skills acquired are applicable to a range of future pathways.

S Welsh - Teacher of Health and Social Care







Curriculum Implementation

In the Health and Social Care two-year learning journey, lessons are designed to engage all learners whilst embedding core skills and knowledge. Human life span is divided into 6 life stages, which is revisited throughout the course. Underpinning the curriculum is the concept that development can be split into four areas physical, intellectual, emotional and social. Components 1 and 2 are internally assessed, while component 3 is externally assessed. All components build on, and develop knowledge and skills from the previous components.

The course is designed to give pupils a practical introduction to life and work in Health and Social Care, so they can develop their understanding of the sector and see whether it's an industry they would like to be in. The curriculum builds on and uses the knowledge and skills learnt in GSCEs such as Biology and English by allowing pupils to apply their knowledge and skills practically in a vocational context.

The curriculum is designed to give pupils the opportunity to develop sector specific knowledge and skills in a practical learning environment. The main focus is on three areas which cover:

- Skills and processes, such as interpreting data to analyse an individual's health and designing a plan to improve their health and wellbeing
- Attitudes, namely the care values that are vitally important in the sector and the opportunity to practise applying them, both during work experience placements and through role plays
- Knowledge that underpins the effective use of skills, processes and attitudes, including human growth and development, health and social care services and factors affecting people's health and wellbeing.

Pupils are individuals and, as such, they build, retain and recall knowledge at different rates. As a result, contingency time is built into each topic to revisit and address common misconceptions and promote recall to determine if knowledge has been retained. Opportunities are also provided for students to access additional support outside the normal school day, should they request it. Students are encouraged to develop practical, transferable skills which give them confidence to progress in whichever path they choose. Responsive sequencing and interleaving the curriculum are used to support student's development of knowledge. We understand that pupils have a higher rate of knowledge retention if they are given the opportunity to recall past learning and apply this learning in future lessons. As a result, each topic uses PIES consistently and within each lesson memory platform activities are used to interleave knowledge and give students the opportunity to recall learning.

Disciplinary literacy and the knowledge of specialised vocabulary which is used in health and social care is essential to supporting students' academic and theoretical knowledge of the subject. The development of subject specific literacy will also support pupils' ability to interpret examination style questions. Without competent and confident literacy skills, our pupils cannot flourish in the world; it is therefore our duty to prioritise the vital acquisition of high-quality communication skills including the verbal skills required for working with service users in the health and social care sector. Health and social care at Parkside is fully inclusive and designed to support the learning of all pupils, irrespective of their individual needs. Essential life skills gained during the lessons equip pupils with the ability to improve their own health and wellbeing as well as that of those around them. It is therefore vital that it meets needs of all members of our community.







Curriculum Impact

The impact of our Health and Social Care Curriculum Learning Journey is defined through the accessibility pupils have to developing knowledge and the application of skills. This is determined through a number of measures:

- ✓ Formative Reporting of Pupil Progress will take place through assessments that take place in lessons and include pupil questioning, discussion, the completion of examination style questions and the completion of homework.
- ✓ Summative Reporting of Pupil Progress will take place through examination paper assessments and written assessment at the end of each component. This assessment forms part of the pupil's overall grade. Parents/Carers receive a report following each mid and end point assessment to understand their child's current depth of knowledge and the support they need to further develop this knowledge both inside and outside of school.
- ✓ In-lesson learning, participation and belonging is measured by continually monitoring pupil punctuality to lessons, rewards and sanctions, behaviour referrals, pupil voice and workscrutiny. Our hope is that by continued positivity in these areas, our Health and Social Care Curriculum Learning Journeys are accessible and will, therefore, positively impact knowledge growth and skill application.
- ✓ Knowledge and understanding of the key concepts and skills. Pupils will be able to speak with confidence about human development and the factors that influence health and wellbeing. Pupils will know how to apply the care values when working in health and social care settings. They will have an understanding of positive and negative factors which affect growth and development and how to improve their own health. All pupils will understand the vocational opportunities available to them in the field of health and social care.
- ✓ KS4 health and social care outcomes demonstrate the overall impact of our pupils' health and social care Curriculum Learning Journey with many students in their Post-16 Progression moving on to pursue health and social care after life at Parkside. Our students follow a range of paths including the study of health and social care at Sixth forms and colleges. Students go on to study health and social care or childcare at college along with a number of our students furthering their study of health and social care through a range of apprenticeships.

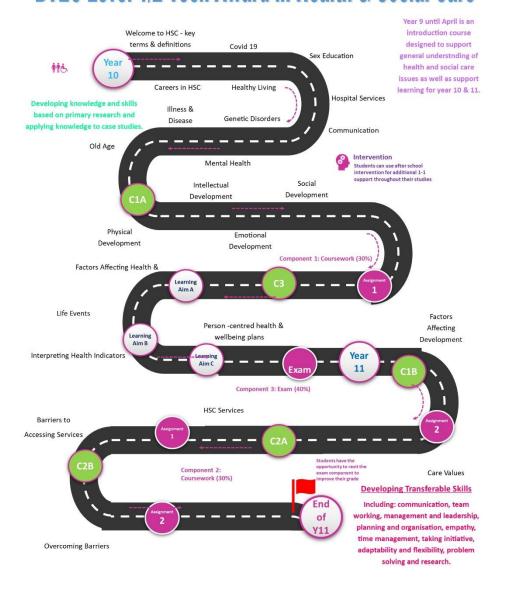






Annex 1: Learning Journey

BTEC Level 1/2 Tech Award in Health & Social Care









Learning Journey overview

Heath and Social Care BTEC - Pearson

How we interleave topics to enable pupils to build and recall knowledge.

SUBJECT: BTEC Health and Social Care

TOPIC: Component 1 Human Lifespan Development

Learning Aim A1: Human growth and development across life stages

Learning Aim A2: Factors affecting growth and development

| KNOWLEDGE | SKILLS |
|---|---|
| Name and age range of each life stage Definition of PIES development Expected PIES development at each life stage Factors that affect development including physical, social, cultural and economic factors. | Applying PIES development to a range of situations Explaining whether effects of PIES are positive or negative Assessing the effect of different factors on development within different life stages Carrying out research on a person of your choice and applying PIES development to three of their life stages. Comparing the effects of different factors within this and assessing the changing impact of different factors on their growth and development |

| Life stages | Menopause |
|----------------------------------|--|
| Infancy | Cognitive development |
| Early childhood | Language development |
| Adolescence | Abstract and creative thinking |
| Early adulthood | Bonding and attachment |
| Middle adulthood | Self-esteem and self-image |
| Later adulthood | Security and contentment |
| | Relationships |
| PIES development | Social isolation |
| Physical | Genetic inheritance |
| Intellectual | Diet and lifestyle choices |
| Emotional | Appearance |
| Social | Cultural factors eg community involvement, |
| | religion, gender role |
| Gross motor skills | Role models |
| Fine motor skills | Personal relationships |
| Puberty | Economic factors eg possessions, wealth |
| Primary sexual characteristics | |
| Secondary sexual characteristics | |





Learning aim, A: Understand human growth and development across life stages and the factors that affect it

Al Human growth and development across life stages

Learners will explore different aspects of growth and development across the life stages using the physical, intellectual, emotional and social (PIES) classification.

- Main life stages:
- o infants (birth to 2 years)
- o early childhood (3-8 years)
- o adolescence (9-18 years)
- o early adulthood (19-45 years)
- o middle adulthood (46-65 years)
- o later adulthood (65+ years).

PIES growth and development in the main life stages:

- o physical growth and development across the life stages, including gross and fine motor skills, growth patterns, primary and secondary sexual characteristics, menopause, loss of mobility, muscle tone/strength and skin elasticity
- o intellectual/cognitive development across the life stages, including language development, problem solving, abstract and creative thinking, development/loss of memory and recall
- o emotional development across the life stages, including bonding and attachment, independence and self-esteem, security, contentment, self-image
- o ·social development across the life stages, including the formation of relationships with others and the socialisation process.

A2 Factors affecting growth and development

Learners will explore the different factors that can affect an individual's growth and development. Different factors will impact on different aspects of growth and development.

- Physical factors, to include:
 - o genetic inheritance
 - o experience of illness and disease
 - o diet and lifestyle choices
 - o appearance.

Social and cultural factors, to include:

- o culture, e.g. community involvement, religion, gender roles and expectations
- o educational experiences
- o the influence of role models
- o the influence of social isolation
- o personal relationships with friends and family.

Economic factors, to include:

- o income/wealth
- o material possessions.







TOPIC: Component 1 Human Lifespan Development

Learning Aim B1: Different types of life event

Learning Aim B2: Coping with change caused by different types of life event

| KNOWLEDGE | SKILLS |
|--|---|
| Identifying expected and unexpected life events Categories of life events including physical events, relationship changes and changes in life circumstances How individuals adapt to life changes What sources of formal and informal support are available and the types of support they can offer | Justifying why a life event is expected or unexpected Applying PIES development to life events in terms of positive and negative effects Exploring how individuals can adapt to life events or how they could be supported through them. Comparing ways that different individuals adapt to the same life event Assessing how well two individuals have adapted to a life event and the role and value of the support in this |

| PIES development | Retirement |
|------------------------|---|
| Physical | Adapting to changes |
| Intellectual | Sources of support |
| Emotional | Family, friends, partners |
| Social | Professional carers and services |
| | Community groups, voluntary and faith |
| Expected life events | organisations |
| Unexpected life events | Emotional support |
| Accident/injury | Information and advice |
| III health | Practical help, eg financial assistance, childcare, |
| Relationships | transport |
| Marriage/Divorce | Formal support |
| Parenthood | Informal support |
| Bereavement | |
| Life circumstances | |
| Exclusion from school | |
| Imprisonment | |
| Redundancy | |







Learning aim B: Investigate how individuals deal with life events

Life events are expected or unexpected events that occur in an individual's life. Learners will explore the different events that can impact on people's physical, intellectual, emotional and social development.

Physical events, to include:

- o accident/injury
- o ill health.

Relationship changes, to include:

- o entering into relationships
- o marriage
- o divorce
- parenthood
- o bereavement.

Life circumstances, to include: o moving house, school or job or exclusion from education

- o redundancy
- o imprisonment
- o retirement.

Coping with change caused by life events

Learners will explore how individuals can adapt or be supported through changes caused by life events. People may react very differently to the same type of event.

• How individuals adapt to these changes.

Sources of support:

- o family, friends, partners
- o professional careers and services
- o community groups, voluntary and faith-based organisations.

Types of support:

- o emotional
- o information and advice
- o practical help, e.g. financial assistance, childcare, transport.







TOPIC: Component 2 Health and Social Care Service and Values

Learning Aim A1: Health and social care services

Learning Aim A2: Barriers to accessing services

| KNOWLEDGE | SKILLS |
|---|---|
| What services are available and why individuals might need to use them How services meet individuals needs Definition and examples of primary, secondary and tertiary care Differences between health and social care Types of barrier to receiving care and how they make accessing care difficult for different service users | Research into different types of care and how they support individuals, both locally and nationally Explaining how health and social care services meet the needs of individuals and how their access to services can be affected by different types of barrier Analysing the extent to which health and social care services meet the needs of individuals. Assessing the suitability of health and social care services for individuals and making justified and realistic suggestions for how barriers can be overcome. |

| PIES development | Barriers to care |
|--|---|
| Physical | Physical barriers |
| Intellectual | Sensory barriers eg hearing and visual difficulties |
| Emotional | Social, cultural and psychological barriers, eg |
| Social | cultural beliefs, social stigma |
| | Language barriers |
| Health care services | Geographical barriers |
| Primary care | Intellectual barriers |
| Secondary care | Resource barriers for service providers |
| Tertiary care | Financial barriers for service users |
| Allied health professionals | |
| | |
| Social care services | |
| Services for children and young people | |
| Services for adults and children with specific | |
| needs | |
| Residential care | |
| Respite care | |
| Domiciliary care | |
| Services for older adults | |
| Informal and formal care | |







Learning aim A: Understand the different types of health and social care services and barriers to accessing them

Al Health and social care services

Learners will explore the health and social care services that are available and why individuals may need to use them.

- Different health care services and how they meet service user needs:
- o primary care, e.g. GPs, dental care, optometry, community health care
- o secondary and tertiary care, e.g. specialist medical care
- o allied health professionals, e.g. physiotherapy, occupational therapy, speech and language therapy, dieticians.
- Different social care services and how they meet service user needs:
- o services for children and young people, e.g. foster care, residential care, youth work
- o services for adults or children with specific needs (learning disabilities, sensory impairments, long-term health issues), e.g. residential care, respite care, domiciliary care
- o services for older adults, e.g. residential care, domiciliary care
- o the role of informal social care provided by relatives, friends and neighbours.

A2 Barriers to accessing services

Learners will explore barriers that can make it difficult to use these services and how these barriers can be overcome.

- Types of barriers and how they can be overcome by the service providers or users:
- o physical barriers, e.g. issues getting into and around the facilities
- o sensory barriers, e.g. hearing and visual difficulties
- o social, cultural and psychological barriers, e.g. lack of awareness, differing cultural beliefs, social stigma, fear of loss of independence
- o language barriers, e.g. differing first language, language impairments
- o geographical barriers, e.g. distance of service provider, poor transport links
- o intellectual barriers, e.g. learning difficulties
- o resource barriers for service provider, e.g. staff shortages, lack of local funding, high local
- o financial barriers, e.g. charging for services, cost of transport, loss of income while accessing services.







TOPIC: Component 2 Health and Social Care Service and Values

Learning Aim B1: Care values

Learning Aim B2: Reviewing own application of care values

| KNOWLEDGE | SKILLS |
|---|--|
| The seven care values – what each one is and how it should be applied in context Types of abuse and ways to spot them What to do if a service user is at risk from harm How to respond to feedback in order to improve performance | Explaining and how each care value can be demonstrated in different ways and why each one is important. Demonstrating how an individual can be identified as at risk and how to minimise this risk in a given scenario Demonstrate the care values independently in a health and social care context, making justified and appropriate recommendations for how this could be improved that incorporate feedback from others. |

| PIES development | Choices |
|--|-------------------------------|
| Physical | Empowerment |
| Intellectual | Independence |
| Emotional | Needs/wants |
| Social | Privacy |
| | Self-respect |
| Care values | Empathy |
| Empowering and promoting independence | Environment |
| Respect for the individual | Physical harm |
| Maintaining confidentiality | Abuse |
| Preserving dignity of individuals | Discrimination |
| Effective communication | |
| Safeguarding and duty of care | Reflection of own performance |
| Promoting anti discriminatory practice | WWW and EBI |
| | Strengths/weaknesses |
| | Improvement |
| | Feedback |
| | Responding to feedback |
| | |







B1 Care values

Learners will explore and practise applying the different care values that are key to the delivery of effective health and social care services.

- Care values:
- o empowering and promoting independence by involving individuals, where possible, in making choices, e.g. about treatments they receive or about how care is delivered
- o respect for the individual by respecting service users' needs, beliefs and identity
- o maintaining confidentiality (when dealing with records, avoiding sharing information inappropriately, e.g. gossip)
- o preserving the dignity of individuals to help them maintain privacy and self-respect
- o effective communication that displays empathy and warmth
- o safeguarding and duty of care, e.g. maintaining a healthy and safe environment, keeping individuals safe from physical harm
- o promoting anti-discriminatory practice by being aware of types of unfair discrimination and avoiding discriminatory behaviour.

B2 Reviewing own application of care values

Learners will reflect on own application of care values, including using teacher or service-user feedback.

- Key aspects of a review:
- o identifying own strengths and areas for improvement against the care values
- o receiving feedback from teacher or service user about own performance
- o responding to feedback and identifying ways to improve own performance.

Al Factors affecting health and wellbeing

Learners will explore how factors can affect an individual's health and wellbeing positively or negatively. This links to, and extends, knowledge and understanding of life events covered in Component 1, but here the focus is on health and wellbeing.

- Definition of health and wellbeing: a combination of physical health and social and emotional wellbeing, and not just the absence of disease or illness.
- Physical and lifestyle factors that can have positive or negative effects on health and wellbeing:
 - o genetic inheritance, including inherited conditions and predisposition to other conditions
 - o ill health (acute and chronic)
 - o diet (balance, quality and amount)
 - o amount of exercise
 - o substance use, including alcohol, nicotine, illegal drugs and misuse of prescribed drugs
 - o personal hygiene.







- Social, emotional and cultural factors that can have positive or negative effects on health and wellbeing:
 - o social interactions, e.g. supportive/unsupportive relationships, social integration/isolation
 - o stress, e.g. work-related
 - o willingness to seek help or access services, e.g. influenced by culture, gender, education.
- Economic factors that can have positive or negative effects on health and wellbeing:
 - o financial resources.
- Environmental factors that can have positive or negative effects on health and wellbeing:
 - o environmental conditions, e.g. levels of pollution, noise
 - o housing, e.g. conditions, location.
- The impact of life events relating to relationship changes and changes in life circumstances. Interpreting health indicators

B1 Physiological indicators

Learners will interpret indicators that can be used to measure physiological health, interpreting data using published guidance.

- Physiological indicators that are used to measure health:
 - o pulse (resting and recovery rate after exercise)
 - o blood pressure
 - o peak flow
- Using published guidance to interpret data relating to these physiological indicators.
- The potential significance of abnormal readings: risks to physical health

B2 Lifestyle indicators

Learners will interpret lifestyle data in relation to risks posed to physical health.

- Interpretation of lifestyle data, specifically risks to physical health associated with:
 - o smoking
 - o alcohol consumption
 - o inactive lifestyles.







TOPIC: Component 3 Health and Wellbeing

Learning Aim B1: Physiological indicators

Learning Aim B2: Lifestyle indicators

| KNOWLEDGE | SKILLS |
|---|---|
| Identify what is meant by physiological indicators Interpret data on physiological indicators using published guidance Identifying potential significance of abnormal readings and their risks to physical health. Identify what is meant by lifestyle indicators Interpret lifestyle data and the risks to health associated with smoking, alcohol consumption and inactive lifestyles | Measure pulse rate of an individual Use a sphygmomanometer to measure blood pressure Use a peak flow meter to measure peak flow Use equipment to measure and calculate BMI Evaluate readings against published data Use data to suggest SMART targets for a health and wellbeing improvement plan, justifying how these targets link to the needs, wishes and circumstances of the individual. Demonstrate the ability to interpret lifestyle and physiological data and link to factors that could affect that data for an individual. |

| PIES development | Lifestyle data |
|-----------------------|--------------------|
| Physical | Smoking |
| Intellectual | Alcohol |
| Emotional | Inactive lifestyle |
| Social | Exercise |
| | Balanced diet |
| Health indicators | Malnutrition |
| Physiological health | |
| Pulse rate | |
| Blood pressure | |
| Peak flow | |
| Body Mass Index (BMI) | |
| Published guidelines | |
| Interpret | |
| Abnormal readings | |
| Normal readings | |
| Risks | |







TOPIC: Component 3 Health and Wellbeing

Learning Aim A1: Factors affecting health and wellbeing

| KNOWLEDGE | SKILLS |
|--|--|
| The difference between health and wellbeing Factors that affect health and wellbeing positively and negatively Extension of knowledge of life events from Component 1 but with a focus on health and wellbeing Impact of life events relating to relationship changes and changes in life circumstances | To explain whether factors affect health or wellbeing within a given scenario To categorise factors within physical, lifestyle, social, emotional, cultural, economic or environmental and recognise that some factors may cover more than one category. To justify whether factors in a given scenario affect the individual positively or negatively. Take factors into account when designing a health and wellbeing improvement plan that recommends improvements in lifestyle that are linked to specific targets for an individual. |

| PIES development | Economic factors |
|---------------------------------------|-----------------------|
| Physical | Financial resources |
| Intellectual | Environmental factors |
| Emotional | Pollution |
| Social | Noise |
| | Housing conditions |
| Health and wellbeing | Relationship changes |
| Lifestyle factors | Life circumstances |
| Genetic inheritance | |
| Acute and chronic illness | |
| Balanced diet | |
| Exercise | |
| Substance use | |
| Personal hygiene | |
| Cultural factors | |
| Social interactions | |
| Supportive/unsupportive relationships | |
| Stress | |
| Willingness | |
| | |







TOPIC: Component 3 Health and Wellbeing

Learning Aim C1: Health and wellbeing improvement plans

Learning Aim C2: Obstacles to implementing plans

| KNOWLEDGE | SKILLS |
|--|--|
| Content and layout of a health and wellbeing improvement plan Value of a person-centered approach Importance of taking into account needs wishes and circumstances Short- and long-term targets Appropriate sources of support How obstacles can prevent an individual implementing a health and wellbeing improvement plan | Complete a health and wellbeing improvement plan for a given individual Use SMART targets effectively to suggest long and short-term targets Link and consolidate support services and care values from component 2 Provide clear and convincing justification for the plan, linking to needs wishes and circumstances. Clearly describe potential obstacles that may arise in keeping to the plan and make realistic suggestions about how they could be improved |

| PIES development | Obstacles |
|---------------------------------------|----------------------|
| Physical | Emotional |
| Intellectual | Psychological |
| Emotional | Motivation |
| Social | Self-esteem |
| | Time constraints |
| Health and wellbeing improvement plan | Financial resources |
| Person centered approach | Unachievable targets |
| Needs, wishes and circumstances | Ability/disability |
| Recommended actions | Barriers to services |
| SMART targets (specific, measurable, | |
| achievable, realistic, timed) | |
| Long term (over 6 months) | |
| Short term (less than 6 months) | |
| Formal support | |
| Informal support | |
| | |
| | |







Core Knowledge Concepts

Health and Social care Curriculum implementation

Knowledge concepts used to form Schemes of Learning

Y10 & 11 Core Knowledge Concepts

Component 1

C1 Health and wellbeing improvement plans

Learners will explore the features of health and wellbeing improvement plans. It links to, and consolidates, knowledge and understanding from Component 2, in particular support services and also care values in terms of the need for a person-centered approach.

- The importance of a person-centered approach that considers an individual's needs, wishes and circumstances.
- Information to be included in plan:
 - o recommended actions to improve health and wellbeing
 - o short-term (less than six months) and long-term targets
 - o appropriate sources of support (formal and/or informal).

C2 Obstacles to implementing plans

Learners will explore the obstacles that individuals can face when implementing these plans and how they may be mitigated.

- Potential obstacles:
 - o emotional/psychological lack of motivation, low self-esteem, acceptance of current state
 - o time constraints work and family commitments
 - o availability of resources-financial, physical, e.g. equipment
 - o unachievable targets unachievable for the individual or unrealistic timescale
 - o lack of support, e.g. from family and friends
 - o other factors specific to individual ability/disability, addiction
 - o barriers to accessing identified services.

