



ASSESSMENT and  
QUALIFICATIONS  
ALLIANCE

## General Certificate of Secondary Education

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# Health and Social Care 3821 (Double Award) 2008

Material accompanying this Specification

- Specimen and past papers and mark schemes
- Report on the Examination

# SPECIFICATION

This specification will be published annually on the AQA Website ([www.aqa.org.uk](http://www.aqa.org.uk)). If there are any changes to the specification centres will be notified in print as well as on the Website. The version on the Website is the definitive version of the specification.

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# Background Information

## 1

# General Certificate of Secondary Education (Vocational Subjects)

### 1.1 Introduction

The General Certificate of Secondary Education in Health and Social Care (Double Award) replaces the Part One GNVQ Foundation and Intermediate qualifications. This GCSE provides a vocationally-related qualification, which covers both Level 1/Foundation and Level 2/Intermediate of the National Qualifications framework. It has been designed to provide a broad education as a foundation both for training leading to employment, and for further and higher education.

### 1.2 National Qualifications Framework

GCSE (Double Award) has the following equivalence to General Certificate of Secondary Education (GCSE) and GNVQ:

| GCSE                     | GCSE<br>Vocational<br>subjects | GNVQ                         |
|--------------------------|--------------------------------|------------------------------|
| Two GCSEs<br>Grades D-G  | One (Double<br>Award) DD-GG    | One 3-unit GNVQ Foundation   |
| Grades A*-C              | One (Double<br>Award) A*A*-CC  | One 3-unit GNVQ Intermediate |
| Four GCSEs<br>Grades D-G | Two (Double<br>Awards) DD-GG   | One 6-unit GNVQ Foundation   |
| Grades A*-C              | Two (Double<br>Awards) A*A*-CC | One 6-unit GNVQ Intermediate |

### 1.3 ICT

The National Curriculum requires that students should be given opportunities to apply and develop their ICT capacity through the use of ICT tools to support their learning. In each specification students will be required to make effective use of ICT in ways appropriate to the needs of the subject.

It is anticipated that a variety of ICT skills could be developed in courses of study based on this specification. The internally-assessed portfolio units could facilitate opportunities for extended use of ICT.

|   |  |
|---|--|
| Tiering   | The GNVQ Part One was offered at Foundation and Intermediate Levels. This GCSE covers both levels. However, the question paper and portfolios for GCSE Health and Social Care (Double Award) will not be tiered.   |
| Citizenship   | Students in England are required to study Citizenship as a National Curriculum subject. Each GCSE specification must signpost, where appropriate, opportunities for developing Citizenship knowledge, skills and understanding. See Section 12 and Appendix E of this specification.   |
| Spiritual, moral, ethical, social, cultural, environmental, health and safety and European issues | All specifications must identify ways in which the study of the subject can contribute to an awareness and understanding of these issues. See section 12 and Appendix E.   |
| Key Skills  | All GCSE specifications must identify, as appropriate, opportunities for generating evidence on which candidates may be assessed in the “main” Key Skills of Communication, Application of Number and Information Technology at the appropriate level(s). Also, where appropriate, they must identify opportunities for developing and generating evidence for addressing the “wider” Key Skills of Working with Others, Improving own Learning and Performance and Problem-Solving. |

In order to assist teachers, these are summarised in Appendix D.

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## Specification at a Glance

### *Health and Social Care*

This is the only specification in this subject offered by AQA.

The scheme of assessment is not tiered.

All three units are compulsory.

Details of the assessment requirements are given in each unit.

|  |                    |
|--|--------------------|
| Health and Social Care (Double Award)  |                    |
| Unit 1   |                    |
| Health, Social Care and Early Years Provision  |                    |
| Portfolio  | 33% of total marks |
| A portfolio on how the needs of two individuals from two different client groups may be met by service providers in their local area |                    |
| Unit 2   |                    |
| Promoting Health and Well-Being  |                    |
| Portfolio  | 33% of total marks |
| A portfolio containing a health plan for improving or maintaining the physical health and well-being of an individual                |                    |
| Unit 3   |                    |
| Understanding Personal Development and Relationships   |                    |
| Written paper  | 34% of total marks |
| Short answer and structured/free response questions  |                    |
| 1½ hours   |                    |

|  |   |
|--|---|
| Health and Social Care<br>(Double Award) | ← |
| 3821                                     |   |

## 3

## Availability of Assessment Units and Entry Details

### 3.1 Availability of Assessment Units

Assessments based on this specification are available as follows.

|              | Externally-assessed unit | Portfolio moderation for each unit | Qualification |
|--------------|--------------------------|------------------------------------|---------------|
| January 2004 | ✓                        |                                    |               |
| June 2004    | ✓                        | ✓                                  | ✓             |
| January 2005 | ✓                        |                                    | ✓             |
| June 2005    | ✓                        | ✓                                  | ✓             |

### 3.2 Entry Codes

Normal entry requirements apply but the following entry information should be noted. The Subject Code for entry to the GCSE in Health and Social Care (Double Award) is 3821. In addition, an entry for individual units is required, using the following unit codes:

Unit 1 – 3820/1  
 Unit 2 – 3820/2  
 Unit 3 – 3820/3

### 3.3 Classification Codes

Each specification is assigned to a national classification code, indicating the subject area to which it belongs.

Centres should be aware that candidates who enter for more than one GCSE qualification with the same classification code will have only one grade (the highest) counted for the purpose of the School and College Performance Tables.

The **Classification Code** for this specification is 0003.

### 3.4 Private Candidates

This specification is available for private candidates in the following situations:

- where candidates have already received results for the internally-assessed units, the externally-assessed unit and entry for the qualification is available;
- where a GCSE in Health and Social Care (Double Award) has already been made, the internally-assessed unit results may be carried forward and reused within twelve months if the externally-assessed unit is being retaken. Private candidates should write to AQA for a copy of *'Supplementary Guidance for Private Candidates'*.

**3.5 Special Consideration**

Special consideration may be requested for candidates whose work has been affected by illness or other exceptional circumstances. The appropriate form and all relevant information should be forwarded to the department which deals with such matters at the AQA office for the centre concerned. Special arrangements may be provided for candidates with special needs.

Details are available from AQA and centres should ask for a copy of *“Regulations and Guidance relating to Candidates with Particular Requirements”*.

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**3.6 Language of Examination**

All assessment Units are provided in English only.

# Scheme of Assessment

## 4

## Introduction

### 4.1 National Criteria

This AQA GCSE in Health and Social Care (Double Award) specification complies with the following:

- The GCSE Subject Criteria for Health and Social Care;
- The GCSE, GCE, VCE and GNVQ Code of Practice;
- The GCSE (Double Award) Qualification-Specific Criteria;
- The Arrangements for the Statutory Regulation of External Qualifications in England, Wales and Northern Ireland: Common Criteria.

### 4.2 Rationale

The fundamental philosophy of this specification is that, in order to understand the nature of Health and Social Care, students must actively experience the Health and Social Care environment. Therefore, the AQA GCSE in Health and Social Care (Double Award) has been designed to:

- introduce students to work-related learning;
- provide students with an overview of the sector;
- give students the technical knowledge, skills and understanding associated with the subject at these levels;
- equip students with some of the skills they will need in the workplace or in further education or training;
- empower students to take charge of their own learning and development;
- provide a range of teaching, learning and assessment styles to motivate students to achieve the best they can.

Assessment is designed to give credit for what students can do as well as what they know. It is based both on portfolio evidence and an external assessment, which is set and marked by AQA.

This specification is supported by a range of professional institutes and Further and Higher Education Institutions.

### 4.3 Prior level of attainment and recommended prior learning

Students embarking upon a GCSE in Health and Social Care (Double Award) should have achieved a general educational level equivalent to Level 3 of the National Curriculum or Entry Level 3 in the National Qualifications Framework. They would find the following learning, skills and aptitudes helpful:

- basic proficiency in literacy
- basic proficiency in numeracy
- some aptitude for computers
- some motivation to work independently.

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#### 4.4 Progression

This qualification is a recognised part of the National Qualifications framework. As such, it provides progression from Key Stage 3 to post-16 studies.

It lays an appropriate foundation for further study of Health and Social Care or related subjects at GCE/VCE Advanced Subsidiary and Advanced levels.

Supported by appropriate work placement/experience, it also enables candidates to progress to a NVQ in *Early Years' Care and Education*, Level 2.

In addition, it provides a worthwhile course for candidates of various ages and from diverse backgrounds in terms of general education and lifelong learning.

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## Aims

A course based on this specification should encourage students to:

- a. prepare for progression to employment and/or further training in the health, social care and early years sectors through the development of knowledge, skills and understanding needed for work in these sectors;
- b. increase their knowledge and understanding of the health, social care and early years sectors through the investigation and evaluation of a range of services and organisations;
- c. develop their awareness of the influences on an individual's health and well-being and to highlight the importance of motivation and support when improving health;
- d. recognise the importance of the stages of development of an individual and their relationships;
- e. promote a critical and analytical approach to problem-solving within the vocational context.

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## Assessment Objectives

Candidates must demonstrate their ability to:

- A01 recall and apply the knowledge, skills and understanding specified in the subject content in a range of vocationally-related situations;
- A02 plan and carry out investigations and tasks in which they analyse vocationally-related issues and problems; and gather, record and identify relevant information and evidence;
- A03 evaluate evidence, make reasoned judgements and present conclusions accurately and appropriately.

## 7

# Scheme of Assessment

## 7.1 Introduction

This GCSE is assessed by means of a combination of external assessment (externally set and marked) and internal assessment (portfolio evidence).

Each unit is assessed by one method only.

## 7.2 External Assessment

The following unit has an external assessment:

Unit 3 Understanding Personal Development and Relationships

Written Paper

1½ hours

20 – 40% of the questions will relate to Assessment Objective 1 – recall and apply knowledge, skills and understanding specified in the subject content in a range of vocationally-related situations.

60 – 80% of the questions will relate to Assessment Objective 3 – evaluate evidence, make reasoned judgements and present conclusions accurately and appropriately.

The questions will be a mixture of short-answer, structured and free response.

The written paper is set and marked by AQA and is available in January and June each year.

## 7.3 Internal Assessment

Unit 1: Health, Social Care and Early Years Provision  
and  
Unit 2: Promoting Health and Well-Being  
are internally assessed.

Moderation will be available in June each year.

## 7.4 Weighting of Assessment Objectives

The approximate relationship between the relative percentage weighting of Assessment Objectives (AOs) and the overall Scheme of Assessment is shown in the following table:

| Assessment Objectives                 | Unit Weightings (%) |        |        | Overall Weighting of AOs (%) |
|---------------------------------------|---------------------|--------|--------|------------------------------|
|                                       | Unit 1              | Unit 2 | Unit 3 |                              |
| AO1                                   | 7                   | 7      | 11     | 25                           |
| AO2                                   | 15                  | 15     | -      | 30                           |
| AO3                                   | 11                  | 11     | 23     | 45                           |
| <b>Overall Weighting of Units (%)</b> | 33                  | 33     | 34     | 100                          |

# Subject Content

8

## GCSE In Health and Social Care (Double Award) Unit 1 Health, Social Care and Early Years Provision

### 8.1 About this Unit

You will learn about:

- the range of care needs of major client groups
- the types of services that exist to meet client group needs and how they are organised
- the ways people can obtain care services and the barriers that can prevent people from gaining access to services
- the main work roles and skills of people who provide health, social care and early years services
- the values that underpin all care work with clients.

You will understand more about the work of health, social care and early years service providers by:

- understanding how services are developed in response to social policy goals and to meet the needs of individuals
- knowing about the different services and job roles.

This unit is assessed through portfolio work. Your overall results for the unit will be reported as a mark on the Uniform Mark Scale, see section 18.

### 8.2 What you need to Learn

Care needs of major client groups

**Key issue:** Who needs to use care services and why?

You should understand how care services are designed to meet the health, developmental, and social care needs of major client groups. You should understand that services are shaped to meet the needs of individual users. The major client groups are:

- babies and children
- adolescents
- adults
- older people
- disabled people.

You should understand how services are developed and provided to meet social policy goals, such as reducing child poverty, homelessness and drug misuse in the population as a whole.

You should know that health authorities and local authorities assess the care needs of local populations in order to identify likely service demand in a local area.

You should also be able to identify and describe the reasons why individuals may require and seek to use health, social care and early years services.

## Types of care services

**Key issue:** What types of care services are provided to meet client group needs?

You will need to find out about organisations and private practitioners that deliver health care, social care and early years services. You will need to identify the main types of care services that are offered to different client groups. Some examples are included in the table on the pages 16-17.

You must know who provides the services and where they are made available. You should understand that there may be national and regional variations. You should be able to identify local and national examples of service providers who operate in the:

- statutory care sector (including NHS Trusts and local authority services)
- private care sector (including private companies and self-employed practitioners)
- voluntary care sector (including charities and local support groups using volunteers and not-for-profit organisations with paid employees).

You should also understand how the different service providers work together to meet client group needs.

You should also know that informal carers (family, friends and neighbours) also provide a large amount of care.

| <b>Client group</b> | <b>Health care services</b>  | <b>Social care services</b>   | <b>Early years services</b>   |
|---------------------|--|---|---|
| Babies and children | Primary health care (including maternity services, health visitors), general hospital services, mental health care, speech therapy, dentistry.   | Foster care, residential care, child protection, child and family support group services.   | Childminders, playgroups and nursery education, family centres, crèches, after school care, toy libraries, child guidance, parent and toddler support groups. |
| Adolescents         | School medical services, primary health care, general hospital services, dental services, mental health care, health promotion (smoking, sexual health, drugs, alcohol).   | Foster care, residential care, youth offending services, child protection, youth work, support group services.  |   |
| Adults              | Primary health care (including community provision of district and community mental health nursing), general hospital services, mental health care, family planning clinics, health promotion (smoking, sexual health, drugs, alcohol), complementary therapies, hospices. | Housing / homelessness services, residential care, refuges, day centres, counselling support (e.g. Samaritans), information and advice services, social work, support groups. Service user organisations. |   |

|                                       |  |  |  |
|---------------------------------------|--|--|--|
| Older people                          | Primary health care (including district and community mental health nursing), occupational therapy, complementary therapies, dentistry, chiropody/podiatry, specialist hospital services (general and mental health), nursing homes, hospices. | Sheltered / supported housing, residential care, home helps, day centres, lunch clubs, information and advice services, social work, support group services, service user organisations.                 |  |
| Disabled people (additional services) | Any of the above according to individual and local needs.  | Any of the above according to individual and local needs.  | Any of the above according to individual and local needs.  |
|                                       | Additionally, specialist medical and nursing services, physiotherapy, psychology, occupational therapy, complementary therapies, specialist education and training services (work-related and rehabilitative training schemes, for example).   | Additionally, specialist support and provision through service user organisations, direct payment personal assistance, social education (life skills education and supported work schemes, for example). | Separate, specialist education provision and support services are provided in addition to integration within mainstream provision. |

Ways of obtaining care services and barriers to access

**Key issue:** How can people gain access to care services and what can prevent people from being able to use the services that they need?

The ways that people gain access to care services are known as methods of referral. You should know about the different methods of referral that exist. These are:

- **self-referral:** choose to ask for or go to the services by themselves
- **professional referral:** being put in contact with a service by a care practitioner such as a doctor, nurse, or social worker, for example
- **third-party referral:** being put in contact with a service by a friend, neighbour, relative or another person who is not employed as a care practitioner (for example, own employer or a teacher).

You should also be able to identify barriers that might prevent people from making use of the services that they need including:

- **physical barriers** - for example, stairs, a lack of lifts and a lack of adapted toilet facilities can prevent access to premises by people with mobility problems
- **psychological barriers** - for example, fear of losing independence, the stigma associated with some services and not wanting to be looked after can deter people from making use of care services. Mental health problems can also prevent those in need from accessing services
- **financial barriers** - for example, charges and fees can deter and exclude people who have not got the money to pay for the services that they need
- **geographical barriers** - for example, in rural areas the location of an organisation and practitioner may be a barrier to use if there is also a lack of public transport, or a long car journey is required to get there
- **cultural and language barriers** - for example, cultural beliefs about who should provide care and how illness and social problems should be dealt with, as well as difficulties in using English, may deter members of some communities from using care services
- **resource barriers** - for example, lack of staff, lack of information about services, lack of money to fund services or a large demand for services can prevent people from gaining access to services when they need or want them.

You should be able to identify ways in which services and the individuals they serve might overcome these barriers.

You should also understand that poor integration of services, rationing and the ‘postcode lottery’ may affect availability of services in your local area.

The main jobs in health, social care and early years services

**Key issue:** What does care work involve and what skills do care practitioners need in order to perform their work roles?

You should be able to compare the main work roles of care workers. You should understand the similarities and differences in the work roles of health, social care and early years workers. You should know about the roles of practitioners who deliver care directly and those whose work is more indirectly involved with care. Examples are:

- direct care: nurse, doctor, social worker, care assistant, nursery nurse
- indirect care: medical receptionist, cleaner, porter.

You should understand how changes in services and service provision can affect the job roles of care workers and change the skills required for those jobs.

You should understand why care workers need good interpersonal skills. You should also know how care workers use communication skills to develop care relationships, provide and receive information and to report on the work that they do with clients.

You will need to know how effective communication can help support relationships with colleagues, clients and their families and how poor skills can reduce the effectiveness of care work or damage care relationships. You should particularly recognise the differing communication needs of client groups using care services.

The value bases of care work

**Key issues:** What values do care workers promote through their work?

Services all aim to help people to develop or maintain their independence. You should understand the balance that services have to achieve between getting involved in people's lives or not, including the risks to both individuals and society associated with both action and inaction.

You should understand the values that are an essential feature of all care practice. You will appreciate and understand that care practitioners use guidelines and codes of practice to empower clients by:

- promoting anti-discriminatory practice
- maintaining confidentiality of information
- promoting and supporting individuals' rights to dignity, independence, health and safety
- acknowledging individuals' personal beliefs and identity
- protecting individuals from abuse
- promoting effective communication and relationships
- providing individualised care.

You should know how these values are reflected in the behaviour and attitudes of care workers and how these values are incorporated into the codes of practice of different care professions and the policies, procedures and employment contracts of care organisations.

Paragraph 8.9 gives further details of how these underlying values and principles are applied to the Early Years sector.

---

### 8.3 Assessment Requirements

Each student is required to produce portfolio work on how the needs of two individuals from two different client groups may be met by service providers in their local area. The portfolio must include:

- the organisation of the services and the roles of people who work in them to meet the needs of two chosen individuals
- how the care value base underpins work in supporting the two individuals
- relevant codes of practice or charters
- ways in which different types of communication skills are used to support the two individual clients.

---

### 8.4 Assessment Marking Criteria

The complete portfolio of each candidate will be marked according to criteria set out below in sections 8.5 to 8.7.

Organising the Assessment Objectives in this way is intended to enable teachers to adhere closely to the assessment criteria as the skills assessed by each criterion are closely related. It also allows the marking scheme for each criterion to follow a level of response approach with the marking band for each level spanning a maximum of 6 marks.

## 8.5 Knowledge and Understanding

|  |   |   |  |   |
|--|---|---|--|---|
| <p><b>0 marks</b></p> <p>No work worthy of credit.</p> | <p><b>1-3 marks</b></p> <p>Work shows limited recall of factual knowledge at a minimal level of understanding of the organisation and services and the roles of the people who work in them. There will be little evidence of the use of appropriate specialist Health and Social Care terminology or of opinions relating to the use of codes of practice and/or charters. There will be minimal evidence relating to the use of communication skills.</p> | <p><b>4-6 marks</b></p> <p>Work will show recall of knowledge but will lack breadth and detailed understanding of the organisation of services and the roles of the people who work in them to meet the needs of the individual clients. There will be an ability to use specialist Health and Social Care terms but some inaccuracy in their use when showing how the care value base underpins work in supporting the clients. Opinions on how codes of practice or charters are relevant to the care of clients will lack some detail and coherence. There will be restricted evidence of a limited range of communication skills used to support the clients.</p> | <p><b>7-9 marks</b></p> <p>Work will exhibit a significant amount of accurate and relevant knowledge of the organisation of services and the roles of the people who work in them to meet the needs of the individual clients. There will be good use of specialist Health and Social Care terminology when showing how the care value base underpins work in supporting the clients. There will be some evidence of the ability to formulate coherent and logical opinion of how codes of practice or charters are relevant to the care of the clients. There will be some evidence of how different types of communication skills are used to support the clients.</p> | <p><b>10-12 marks</b></p> <p>Work will show sound knowledge and clear understanding of the organization of services and the roles of the people who work in them to meet the needs of the individual clients. Specialist Health and Social Care terms will be used with accuracy and understanding when showing how the care value base underpins work in supporting the clients. There will be sound evidence of the ability to formulate coherent and logical opinion of how codes of practice or charters are relevant to the care of clients. There will be detailed evidence of how a variety of different types of communication skills is used to support the clients.</p> |
|--|---|---|--|---|

**8.6 Plan and carry out investigations and tasks, analyse issues and problems; gather, record and identify relevant information and evidence.**

| <b>0 marks</b>                   | <b>1-5 marks</b>   | <b>6-11 marks</b>  | <b>12-16 marks</b>  | <b>17-22 marks</b>   |
|----------------------------------|--|--|---|--|
| <p>No work worthy of credit.</p> | <p>The candidate carries out the planned investigations/tasks on how the needs of two individuals may be met with frequent assistance. The candidate has gathered a limited amount of information on some of the following:</p> <ul style="list-style-type: none"> <li>the organization of services and the roles of people working in them;</li> <li>how the care value base underpins work;</li> <li>relevant codes of practice/charters;</li> <li>how communication skills are used for support.</li> </ul> <p>Evidence of identifying and recording relevant information on how the individuals' needs may be met will be minimal.</p> | <p>The candidate carries out the planned investigations/tasks on how the needs of two individuals may be met with only occasional assistance. The candidate has gathered information from more than one source on some or all of the following:</p> <ul style="list-style-type: none"> <li>the organization of services and the roles of people working in them;</li> <li>how the care value base underpins work;</li> <li>relevant codes of practice/charters;</li> <li>how communication skills are used for support.</li> </ul> <p>Evidence of identifying and recording relevant information on how the individuals' needs may be met will be limited.</p> | <p>The candidate carries out the planned investigations/tasks on how the needs of two individuals may be met mainly independently. The candidate can identify and analyse the main aspects of the investigations/tasks. The candidate has gathered information from a variety of sources on all of the following:</p> <ul style="list-style-type: none"> <li>the organization of services and the roles of people working in them;</li> <li>how the care value base underpins work;</li> <li>relevant codes of practice/charters;</li> <li>how communication skills are used for support.</li> </ul> <p>A good attempt has been made to identify and record relevant information on how the individuals' needs may be met using appropriate techniques.</p> | <p>The candidate carries out the planned investigations and tasks on how the needs of two individuals may be met in an independent manner. The candidate can identify and analyse all aspects of the investigation/tasks clearly and concisely. The candidate has gathered information from a wide range of relevant resources on all of the following:</p> <ul style="list-style-type: none"> <li>the organization of services and the roles of people working in them;</li> <li>how the care value base underpins work;</li> <li>relevant codes of practice/charters;</li> <li>how communication skills are used for support.</li> </ul> <p>A high standard of presentation and organisation on how the individuals' needs may be met has been demonstrated using a wide range of suitable techniques.</p> |

**8.7 Evaluate evidence, make reasoned judgements, present conclusions accurately and appropriately.**

| <b>0 marks</b>                   | <b>1-4 marks</b>   | <b>5-8 marks</b>  | <b>9-12 marks</b>   | <b>13-16 marks</b>   |
|----------------------------------|--|---|---|--|
| <p>No work worthy of credit.</p> | <p>Evidence of interpretation and evaluation of the individuals' needs will be minimal. The candidate's reasoned judgements may be limited in application and some decisions may not be appropriate in relation to some of the following:</p> <ul style="list-style-type: none"> <li>the organization of services and the roles of people working in them;</li> <li>how the care value base underpins work;</li> <li>relevant codes of practice/charters;</li> <li>how communication skills are used for support.</li> </ul> <p>The attempt to present conclusions to how the individuals' needs may be met by service providers may be simplistic and cover limited aspects only.</p> | <p>Evidence of interpretation and evaluation of the individuals' needs will be limited. The candidate has made an attempt to make reasoned judgements and taken some decisions which may not always be logical on some or all of the following:</p> <ul style="list-style-type: none"> <li>the organization of services and the roles of people working in them;</li> <li>how the care value base underpins work;</li> <li>relevant codes of practice/charters;</li> <li>how communication skills are used for support.</li> </ul> <p>The presentation of conclusions to how the individuals' needs may be met by service providers may be limited and cover some aspects only.</p> | <p>A good attempt has been made to interpret and evaluate the individuals' needs. The candidate has made some reasoned judgements and taken some logical decisions on all of the following:</p> <ul style="list-style-type: none"> <li>the organization of services and the roles of people working in them;</li> <li>how the care value base underpins work;</li> <li>relevant codes of practice/charters;</li> <li>how communication skills are used for support</li> </ul> <p>Conclusions to how the individuals' needs may be met by service providers are presented covering most aspects, some in detail.</p> | <p>Interpretation and evaluation of the individuals' needs are thorough and objective. The candidate has made clear, reasoned judgements and taken logical decisions throughout on all of the following:</p> <ul style="list-style-type: none"> <li>the organization of services and the roles of people working in them;</li> <li>how the care value base underpins work;</li> <li>relevant codes of practice/charters;</li> <li>how communication skills are used for support</li> </ul> <p>Critical and effective conclusions to how the individuals' needs may be met by service providers are presented covering all aspects.</p> |

**8.8 Essential Information for Teachers**

This unit will be assessed entirely on a portfolio of evidence based on the candidate's own investigation of how the needs of two individuals from two different client groups may be met by service providers in their local area.

To fulfil these requirements candidates need to take part in a planned learning programme covering the knowledge, skills and understanding which are specified in the *What you need to Learn* section of the unit.

Centres should ensure that sufficient time is given to the teaching of the key terms and concepts contained within this unit before embarking on the portfolio.

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**8.9 Guidance on Delivery**

The information in this section has been provided to assist teachers facilitate the students' acquisition of knowledge and understanding of health, social care and early years provision. This guide must be read in conjunction with the unit specification (What You Need to Learn) and assessment evidence requirements to which it relates.

**Care need of major clients**

For the purposes of this unit and consistency with Unit 3 (Understanding Personal Development and Relationships) the appropriate age ranges for the major client groups are:

- babies and children 0 – 10 years
- adolescents 11 – 18 years
- adults 19+ years
- older people 65+ years.

Disabled people may, of course, be within any of the above client groups. When looking at care services provided for these different client groups, students should understand how the services reduce the effects caused by such social issues as child poverty, homelessness and drug misuse.

When considering the assessment of care needs in local populations by health and local authorities, students should ask who assesses how this is done and what information is needed to determine service demand.

**Types of Care Services**

The examples of care services given in the specification are not meant to be an exhaustive list. It is also recognised that there will be considerable variation in some care services in different local communities and that classification of services is sometimes different. Given that urban and rural areas may have vastly different provision in the same sized areas, 'local' provision will need to be considered as sufficiently large areas to include examples of care services for each major client group. Teachers may find it useful to provide a bank of case study material where it proves difficult to obtain information from primary sources. It is necessary for students to understand the differences between the statutory, private and voluntary care sectors and to know to which sector a particular care service belongs. Students should not merely offer the names of services, e.g. 'Tinytots'/'Busybees' without description of their roles/services.

|  |   |
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| Ways of obtaining care services and barriers to access       | <p>Students should know the three methods of referral as detailed in the specification, i.e. self, professional and third party referral and should be able to identify the normal referral method or methods associated with the different care services.</p> <p>When identifying barriers to access to services, students should understand how these are different for different client groups – for example, a physical barrier such as a lack of a lift may present a major barrier to some disabled clients and older people with mobility problems, while it may be a minor barrier to a young adult with one or more babies/young children.</p> <p>When identifying ways by which barriers may be overcome, students should consider both the role of the service provider and the individual client, e.g. the service provider may provide a suitable lift or provide ground floor accommodation for the service while the individual may arrange to access the service at a different and more accessible venue.</p> <p>Teachers may find it useful to provide a bank of case study material for students when considering the integration, rationing and ‘postcode lottery’ variations of services in their local areas.</p> |
| The main jobs in health, social care and Early Years service | <p>Work experience opportunities and workplace visits may prove useful for students gathering information about job roles. Further information may be usefully gained from job descriptions, staffing diagrams, careers databases and from visiting speakers.</p> <p>Some job roles, for example nurse and doctor will require clarification, given the different nature of, for example, community and practice nurses, general practitioners and consultants. Students should use up-to-date information about job roles and beware of outmoded roles, e.g. Home Helps.</p> <p>When considering the use of communication skills, this must include verbal and non-verbal components. Students should also consider the use of advocates and translators for those client groups who cannot speak on their own behalf.</p>   |
| The value bases of care work                                 | <p>While students are expected to understand the balance that services aim to achieve in terms of involvement or not with clients’ lives and their right to independence, detailed ethical considerations are not required.</p> <p>Students will find the care value base incorporated into guidelines, ‘rules’ and codes of practice for care workers in different organisations. Students may be able to obtain these independently, but it may be more appropriate for teachers to approach organisations on their behalf, especially in circumstances where numerous repeated requests from different students may cause problems.</p>  |

Underlying values and principles of the Early Years sector

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| The welfare of the child                           | The welfare of the child is paramount. All Early Years workers must give precedence to the rights and well-being of the children with whom they work. Children should be listened to, and their opinions and concerns treated seriously. Management of children's behaviour should emphasise positive expectations for that behaviour, and responses to unwanted behaviour should be suited to the child's stage of development. A child must never be slapped, smacked, shaken, humiliated, belittled or isolated.  |
| Keeping children safe                              | Work practice should help prevent accidents to children and adults, and protect their health. Emergency procedures of the work setting, including record keeping, must be adhered to. Every Early Years worker has a responsibility to:<br><br>contribute to the protection of children from abuse and exploitation, according to her/his work role;<br>report any suspicions of abuse, neglect or ill treatment to the relevant line manager.   |
| Maintaining a healthy and safe working environment | Every individual, irrespective of work role, has a duty and responsibility to implement and maintain safe working practices and procedures. Good practice which has been observed should be brought to the attention of others.  |
| Working in partnership with parents/families       | Parents and families occupy a central position in their children's lives, and Early Years workers must never try to take over that role inappropriately. Parents and families should be listened to as experts on their own child. Information about children's development and progress should be shared openly with parents. Respect must be shown for families' traditions and child care practices, and every effort made to comply with parents' wishes for their children.   |
| Children's learning and development                | Children learn more and faster in their earliest years than at any other times in life. Development and learning in these earliest years lay the foundations for abilities, characteristics and skills in later life. Learning begins at birth (some research suggests that it begins before birth). The care and education of children are interwoven.<br><br>Children should be offered a range of experiences and activities which support all aspects of their development: social, physical, intellectual, linguistic, emotional and creative. The choice of experiences and activities (the "curriculum") should depend on accurate assessment of the stage of development reached by a child, following observation and discussion with families. Early Years workers have varying responsibilities concerning the planning and implementation of the curriculum, according to their work role, but all contributions to such planning and implementation should set high expectations for children and build on their achievements and interests. Child-initiated play and activities should be valued and recognised, as well as the adult-planned curriculum. Written records should be kept of children's progress and these records should be shared with parents and used to inform planning. |

|                         |  |
|-------------------------|--|
| Valuing diversity       | <p>Britain is a multi-racial, multi-cultural society. The contributions made to this society by a variety of cultural groups should be viewed in a positive light and information about varying traditions, customs and festivals should be presented as a source of pleasure and enjoyment to all children including those in areas where there are few members of minority ethnic groups. Children should be helped to develop a sense of their identity within their racial, cultural and social groups, as well as having the opportunity to learn about cultures different from their own. No one culture should be represented as superior to any other: pride in one's own cultural and social background does not require condemnation of another cultural and social background.</p>  |
| Equality of opportunity | <p>Each child should be offered equality of access to opportunities to learn and develop, and so work towards her/his potential. Each child is a unique individual; Early Years workers must respect this individuality; children should not be treated "all the same". In order to meet a child's needs, it is necessary to treat each child "with equal concern": some children need more and/or different support in order to have equality of opportunity. It is essential to avoid stereotyping children on the basis of gender, racial origins, cultural or social background (including religion, language, class and family pattern), or ability; such stereotypes may act as barriers to equality of access to opportunity. Early Years workers should demonstrate their valuing of children's racial and other personal characteristics in order to help them develop self-esteem.</p> <p>These principles of equality of access to opportunity and avoidance of stereotyping must also be applied to interactions with adult family members, colleagues and other professionals. Any individuals responsible for the actions of others within their organisation/setting must ensure that equal opportunities are applied in all work activities, practices and procedures.</p> |
| Anti-discrimination     | <p>Early Years workers must not discriminate against any child, family or group in society on the grounds of gender, racial origins, cultural or social background (including religion, language, class and family pattern), disability or sexuality. They must acknowledge and tackle any personal beliefs or opinions which prevent them respecting the value systems of other people and comply with legislation and the policies of their work setting relating to discrimination. Children learn prejudice from their earliest years and must be provided with accurate information to help them avoid prejudice. Expressions of prejudice by children or adults should be challenged and support offered to those children or adults who are the objects of prejudice and discrimination. Early Years workers have a powerful role to play in nurturing greater harmony for future generations amongst various groups in society.</p>  |
| Confidentiality         | <p>Information about children and families must never be shared with others without the permission of the family, except where a child has been abused, or is at risk from abuse, when agreed guidelines must be followed. Early Years workers must adhere to the policy of their work setting concerning confidential information, including passing on information to colleagues.</p> <p>Information about other workers must also be handled in a confidential manner.</p>  |

|                                    |  |
|------------------------------------|--|
| Working with other professionals   | Advice and support should be sought from other professionals with prior parental agreement, in the best interests of children and families, and information shared with them, subject to the principle of confidentiality. Respect should be shown for the roles of other professionals.   |
| Working in partnership with others | It is important to take account of the thoughts, feelings and beliefs of others within the setting and from outside the setting. Valuing the comments and actions of others is essential to maintaining harmony and reducing potential conflict. For those in a management or supervisory role, treating all staff equally is imperative to ensure productive working relationships. Establishing the professional development needs of staff and helping them to meet these needs is important within this role.  |
| The reflective practitioner        | <p>Early Years workers should use any opportunity they are offered or which arises to reflect on their practice and principles and make use of the conclusions from such reflection in developing and extending their practice. Seeking advice and support to help resolve queries or problems should be seen as a form of strength and professionalism. Opportunities for in-service training/continuous professional development should be used to the maximum.</p> <p>Within the reflective process it is essential that practitioners, whatever their work role, update their knowledge and understanding of current policy, legislation and practice, ensuring that policy is linked with practice.</p>   |
| Suggested teaching activities      | <ul style="list-style-type: none"><li>• investigations and case studies, e.g. of clients at different life stages</li><li>• video and audio recordings, e.g. of different clients</li><li>• presentations and oral explanations, e.g. of local services</li><li>• simulations and group work, e.g. job roles and good/poor client care</li><li>• diaries and logs, e.g. of appropriate work experiences</li><li>• assignments and projects, e.g. for assessment evidence</li><li>• visiting speakers, e.g. for job role descriptions</li><li>• production of posters, photographs and other graphical material, e.g. for specific examples of client care/multi-disciplinary working</li><li>• oral and written reports, e.g. of what care work involves</li><li>• question and answer sessions, e.g. to determine understanding of referral methods/barriers to access</li><li>• student self and peer assessment, e.g. of written reports/oral presentations</li><li>• classroom discussions, e.g. applications of the care value base</li><li>• brainstorming/mind mapping, e.g. for research ideas</li><li>• producing plans, e.g. to develop brainstorm/mind mapping ideas</li><li>• producing media articles, e.g. on local care provision (newspaper/TV/radio programme materials).</li></ul> |

**Group work note**

Group work is a useful way of obtaining information for some activities, but it is important that individual students meet the assessment evidence requirements. Teachers assessing the evidence will need to be convinced of its individual authenticity. Questioning can be used in order to clarify the validity, authenticity and sufficiency of evidence, and under these circumstances the teacher assessor may wish to include a dated witness statement covering this evidence. It is expected that the use of such statements will be kept to a minimum so that they constitute a very minor part of submitted evidence.

**8.10 Guidance on Assessment**

This unit is assessed entirely through the portfolio of evidence based on the candidate's investigation of two individuals from two different client groups.

Candidates should be encouraged to collect their own information. When there are practical difficulties for this to happen, centres could provide a Case Study for one individual. It is possible for more than one candidate to choose the same individual to investigate, but there must be reliable evidence that each candidate has independently satisfied the criteria they are claiming.

It is important that assessors and teachers emphasise to candidates that the chosen individuals are from different client groups. A disabled client may be chosen along with a client of similar age who is not disabled.

Assessors should bear in mind that a range of evidence is acceptable. Tables, charts and diagrams can be used if these provide reliable evidence and assessors can make use of candidates presenting oral evidence if this is fully and reliably assessed and recorded. Signed witness statements should be included in the portfolio to validate the type of evidence which may result from questioning and/or oral presentations. It is expected that oral evidence will form only a very minor part of the evidence submitted.

The inability to produce extensive written evidence should not prevent candidates with a sound knowledge and understanding from achieving a standard commensurate with their ability and understanding.

Assessors must ensure that all candidates fulfil all assessment requirements for each chosen individual.

When assessing candidates' work, assessors should consider the level of attainment in three broad areas:

- the level of independence and originality in portfolio preparation
- the depth and breadth of understanding of the content of the unit
- the level of evaluation and analysis employed.

In the Assessment Marking Criteria mark ranges are given for each criterion. When assessing a candidate's portfolio work, for each criterion teachers should first identify the range of marks within which that work falls, then use their professional judgement to decide which mark within that range best describes the depth and quality of the work. The candidate's total mark for the unit is determined by adding the marks for the different criteria. Further guidance about the marking process will be provided during teacher standardising meetings.

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### 8.11 Resources

It is important to use a range of different, up-to-date resources for teaching and learning purposes. These could include:

Internet websites – NHS/local authorities/government sites

- Health and Social Care text books
- local health, social care and Early Years facilities
- health/social care and Early Years care workers
- leaflets on services – from local authorities/NHS
- community care plans, charters and annual reports
- careers libraries and databases
- work experience placements
- work 'shadowing' of care workers
- local councils for voluntary services
- local directories for voluntary groups
- telephone and trade directories.

## 8.12 Key Skills Guidance

The guidance has been split into two sections: Keys to Attainment and Signposts. The two sections should be used in conjunction with each other.

### Keys to Attainment

These are identified Key Skills or aspects of Key Skills that are central to vocational achievement. If a student has met the indicated vocational requirements of the Unit, the Key to Attainment shows that the relevant aspect of the Key Skill has also been achieved. A Key to Attainment does not negate the need for students to develop and practise the Key Skill during delivery.

### Signposts

These are naturally-occurring opportunities for the development of Key Skills during teaching, learning and assessment. Students will not necessarily achieve the signposted Key Skills through the related vocational evidence. They will need to develop additional evidence elsewhere to ensure that the requirements of the Key Skills Units are met fully.

## 8.13 Communication Levels 1 and 2

### Keys to Attainment

| When students are:  | They will have achieved the following key skills evidence:  |   |
|---|---|---|
| <ul style="list-style-type: none"> <li>discussing and debating about how and why different client groups access different care services and what the barriers to access might be</li> <li>discussing the values underpinning care practice; using booklets from local authorities, NHS trusts, OT departments, charities, textbooks, reports, training and recruitment information for jobs in health, social care and Early Years services etc.</li> </ul> | Level 1   | Level 2   |
|   | <p>C1.1 Take part in a <b>one-to-one</b> discussion and a <b>group</b> discussion about different straightforward subjects.</p> <p>C1.2 Read and obtain information from <b>two</b> different types of documents about straightforward subjects, including at least <b>one</b> image.</p> | <p>C2.1a Contribute to a discussion about a straightforward subject</p> <p>C2.2 Read and summarise information from <b>two</b> extended documents about a straightforward subject. One of the documents should include at least <b>one</b> image.</p> |

**8.14 Communication  
Levels 1 and 2**

Signposts

|  |  |  |
|--|--|--|
| If students are:   | There may be opportunities for them to develop the following key skills evidence:  |  |
| <ul style="list-style-type: none"> <li>incorporating essays, leaflets, information boards, pictures, diagrams, etc. to describe the structure of care services for different client groups: types, access, barriers, etc.</li> <li>presenting information on the care services available to different client groups, covering statutory, private, voluntary and informal care, representing how these work together and with other services by means of a simple diagram.</li> </ul> | Level 1  | Level 2  |
|  | C1.3 Write <b>two</b> different types of documents about straightforward subjects. Include at least <b>one</b> image in <b>one</b> of the documents. | C2.1b Give a short talk about a straightforward subject, using an image.<br><br>C2.3 Write <b>two</b> different types of document about straightforward subjects. One piece of writing should be an extended document and include at least <b>one</b> image. |

**8.15 Application of Number  
Levels 1 and 2**

There are no obvious opportunities for the development or assessment of this key skill in this unit.

**8.16 Information and  
Communication Technology  
Levels 1 and 2**

Signposts

|   |   |  |
|---|---|--|
| If students are:  | There may be opportunities for them to develop the following key skills evidence:   |  |
| <ul style="list-style-type: none"> <li>using given sources on the Internet, CD-ROMs, care services databases and other non-IT sources to obtain information about local services and training; accessing, with direction, <a href="http://www.nhsdirect.nhs.uk">www.nhsdirect.nhs.uk</a></li> <li>developing and reporting information in essays, leaflets, presentations etc., using WP and tables/flow charts/photos/drawings.</li> </ul> | Level 1   | Level 2  |
|   | IT1.1 Find, explore and develop information for <b>two</b> different purposes.<br><br>IT1.2 Present information for <b>two</b> different purposes. Work must include at least <b>one</b> example of text, <b>one</b> example of images and <b>one</b> example of numbers. | IT2.1 Search for and select information for <b>two</b> different purposes.<br><br>IT2.3 Present combined information for <b>two</b> different purposes. Work must include at least <b>one</b> example of text, <b>one</b> example of images and <b>one</b> example of numbers. |

## 8.17 Working with Others Levels 1 and 2

### Signposts

|   |   |   |
|---|---|---|
| If students are:  | There may be opportunities for them to develop the following key skills evidence:                                     |   |
| <ul style="list-style-type: none"> <li>• investigating services/jobs, etc. where individual responsibilities/group objectives are given, e.g. for researching different aspects of a service</li> <li>• assessing individual responsibility to group objectives, e.g. to research local care services for the elderly. Evidence of progression of straightforward tasks following given methods safely and effectively, but asking for help/ supporting other members of the group</li> <li>• discussing progress, identifying good ways of, e.g., finding information, dealing with problems, suggesting better ways of working together.</li> </ul> | Level 1   | Level 2   |
|   | WO1.1 Confirm what needs to be done to achieve given objectives, including responsibilities and working arrangements. | WO2.1 Plan straightforward work with others, identifying objectives and clarifying responsibilities and confirm working arrangements. |
|   | WO1.2 Work with others towards achieving given objectives, carrying out tasks to meet responsibilities.               | WO2.2 Work co-operatively with others towards achieving identified objectives, organising tasks to meet responsibilities.             |
| WO1.3 Identify progress and suggest ways of improving work with others to help achieve given objectives.  | WO2.3 Exchange information on progress and agree ways of improving work with others to help achieve objectives.       |   |

**8.18 Improving own Learning and Performance**  
Levels 1 and 2

Signposts

|   |   |  |
|---|---|--|
| If students are:  | There may be opportunities for them to develop the following key skills evidence:   |  |
| <ul style="list-style-type: none"> <li>• in a group allowing appropriate person to set individual targets/identify action points/deadlines/arrange meetings for reviewing progress/who to ask for help</li> <li>• following plan in LP1.1, seeking support where necessary, using different approaches to learning, including practical activity, e.g. ringing NHS trust/visiting GP's surgery to find out about local services; acting on suggestions for improvement</li> <li>• reviewing what has been learned (e.g. in tutorials) and how student tackled it on one-to-one basis, with encouragement to identify good/bad work and suggest improvements.</li> </ul> | Level 1   | Level 2  |
|   | <p>LP1.1 Confirm understanding of short-term targets and plan how these will be met, with the person setting them.</p> <p>LP1.2 Follow a plan, using support given by others to help meet targets. Improve performance by:</p> <p>studying a straightforward subject;</p> <p>learning through a straightforward practical activity.</p> | <p>LP2.1 Help set short-term targets with an appropriate person and plan how these will be met.</p> <p>LP2.2 Take responsibility for some decisions about learning, using a plan and support from others to help meet targets. Improve performance by:</p> <p>studying a straightforward subject;</p> <p>learning through a straightforward, practical activity.</p> |
|   | <p>LP1.3 Review progress and achievements in meeting targets, with an appropriate person.</p>   | <p>LP2.3 Review progress with an appropriate person and provide evidence of achievements, including how learning from one task to meet the demands of a new task has been used.</p>  |

**8.19 Problem-Solving**  
Levels 1 and 2

There are no obvious opportunities for the development or assessment of this Key Skill in this unit.

# GCSE in Health and Social Care

## Unit 2

### *Promoting Health and Well-Being*

#### 9.1 About this Unit

You will learn about:

- definitions of health and well-being
- common factors that affect health and well-being and the different effects they can have on individuals and groups across the lifespan
- methods used to measure an individual's physical health
- ways of promoting and supporting health improvement for an individual or small group.

The knowledge that you gain from this unit will help you to look after your own health and well-being and understand ways of promoting health and well-being for others.

This unit is assessed through your portfolio work. Your overall result for the unit will be reported as a mark on the Uniform Mark Scale, see section 18.

#### 9.2 What you need to Learn

Understanding health and well-being

**Key issue:** What is health and well-being?

There are several different ways of thinking about health and well-being. You should know that:

- health and well-being can be described as the absence of physical illness, disease and mental distress. This is a negative definition of health and well-being
- health and well-being can be described as the achievement and maintenance of physical fitness and mental stability. This is a positive definition of health and well-being
- health and well-being are the result of a combination of physical, social, intellectual and emotional factors. This is a holistic definition of health and well-being.

You should also know that ideas about health and well-being change over time and vary between different cultures.

Factors positively influencing health and well-being

**Key issue:** What factors contribute positively to health and well-being throughout the lifespan?

A person's health and well-being is affected by a number of different factors. You should know about factors that contribute positively to health and well-being such as:

- a balanced diet
- regular exercise
- supportive relationships
- adequate financial resources
- stimulating work, education and leisure activity
- use of health monitoring and illness prevention services (such as screening and vaccination)
- use of risk management to protect individuals and promote personal safety.

You will learn about the importance of these factors to individuals throughout their lives.

Risks to health and well-being

**Key issue:** What factors are a risk to health and well-being and how do they have a damaging effect?

You should know about factors that put an individual's health and well-being at risk. You should be able to identify the lifestyle factors over which people have control and also the genetic, social and economic factors which people may not be able to change. You will learn that health and well-being can be affected by:

- genetically-inherited diseases and conditions
- substance misuse (including misuse of legal and illegal drugs, solvents, tobacco smoking and excessive alcohol intake)
- an unbalanced, poor quality or inadequate diet
- too much stress
- lack of personal hygiene
- lack of regular physical exercise
- unprotected sex
- social isolation
- poverty
- inadequate housing
- unemployment
- environmental pollution.

You should understand how these factors can affect an individual's health and well-being.

## Indicators of physical health

**Key issue:** How can an individual's physical health be measured?

You will learn that some indicators of physical health can be measured. You will know how the measures listed below can be taken and are used to assess the state of an individual's physical health:

- blood pressure
- peak flow
- Body Mass Index
- resting pulse and recovery after exercise.

You should know that a person's age, sex and lifestyle have to be taken into account when interpreting the measurement that is recorded.

## Health promotion and improvement methods

**Key issue:** How can individuals be motivated and supported to improve their health?

You should know why physical health assessment and target setting should happen before a health improvement plan is produced for an individual. You will learn how realistic health improvement targets are established for others. You will understand how different health behaviours can help people achieve their targets.

You should also know about the different types of health promotion materials that are used to inform, motivate and support people to improve their health and well-being.

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### 9.3 Assessment Requirements

Each student is required to produce a health plan for improving or maintaining the physical health and well-being of an individual. The student may base the plan on him or herself. The plan must include:

- factors affecting health and well-being of the individual
- risks to the individual's health
- records of the use of two measures of health for the chosen individual
- changes the plan might have on the individual.

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### 9.4 Assessment Marking Criteria

The complete portfolio of each candidate will be marked according to criteria set out below in sections 9.5 to 9.7.

Organising the Assessment Objectives in this way is intended to enable teachers to adhere closely to the assessment criteria as the skills assessed by each criterion are closely related. It also allows the marking scheme for each criterion to follow a level of response approach with the marking band for each level spanning a maximum of 6 marks.

9.5 Knowledge and Understanding

|  |  |  |  |  |
|--|--|--|--|--|
| <p><b>0 marks</b></p> <p>No work worthy of credit.</p> | <p><b>1-3 marks</b></p> <p>Work shows limited recall of factual knowledge at a minimal level of understanding of the factors and risks affecting the individual's Health and Well-Being. There will be little evidence of specialist Health and Social Care terminology. The work may include one or two changes the plan may have on the individual but these may not be supported with evidence.</p> | <p><b>4-6 marks</b></p> <p>Work will show recall of knowledge but will lack breadth and detailed understanding of the factors and risks affecting the Health and Well-Being of the individual. There will be an ability to use specialist Health and Social Care terms but some inaccuracy in their use. There will be limited use of evidence to support the opinions on the changes the plan may have on the individual.</p> | <p><b>7-9 marks</b></p> <p>Work will exhibit a significant amount of accurate and relevant knowledge of the factors and risks affecting the Health and Well-Being of the individual. There will be good use of specialist Health and Social Care terminology. Opinions on the changes the plan may have on the individual will be supported with evidence.</p> | <p><b>10-12 marks</b></p> <p>Work will show sound knowledge and clear understanding of the factors and risks affecting the Health and Well-Being of the individual. Specialist Health and Social Care terms will be used with accuracy and understanding. There will be detailed evidence of the ability to formulate coherent and logical opinion on the changes the plan may have on the individual.</p> |
|--|--|--|--|--|

**9.6** Plan and carry out investigations and tasks, analyse issues and problems; gather, record and identify relevant information and evidence.

| <b>0 marks</b>                   | <b>1-5 marks</b>   | <b>6-11 marks</b>  | <b>12-16 marks</b>  | <b>17-22 marks</b>  |
|----------------------------------|--|--|---|---|
| <p>No work worthy of credit.</p> | <p>The candidate carries out the planned investigations/tasks in producing a health plan with frequent assistance. The candidate has gathered a limited amount of information on some of the following:</p> <ul style="list-style-type: none"> <li>factors affecting health and well-being of the individual;</li> <li>risks to the individual's health;</li> <li>changes the plan might have on the individual.</li> </ul> <p>Evidence of identifying and recording relevant information about the use of two measures will be minimal.</p> | <p>The candidate carries out the planned investigations/tasks on producing a health plan with only occasional assistance. The candidate has gathered information from more than one source on some or all of the following:</p> <ul style="list-style-type: none"> <li>factors affecting health and well-being of the individual;</li> <li>risks to the individual's health;</li> <li>changes the plan might have on the individual.</li> </ul> <p>Evidence of identifying and recording relevant information about the use of two measures will be limited.</p> | <p>The candidate carries out the planned investigations/tasks on producing a health plan mainly independently. The candidate can identify and analyse the main aspects of the investigations/tasks. The candidate has gathered information from a variety of sources on all of the following:</p> <ul style="list-style-type: none"> <li>factors affecting health and well-being of the individual;</li> <li>risks to the individual's health;</li> <li>changes the plan might have on the individual.</li> </ul> <p>A good attempt has been made to identify and record relevant information about the use of two measures using appropriate techniques.</p> | <p>The candidate carries out the planned investigations and tasks on producing a health plan in an independent manner. The candidate can identify and analyse all aspects of the investigation/tasks clearly and concisely. The candidate has gathered information from a wide range of relevant resources on all of the following:</p> <ul style="list-style-type: none"> <li>factors affecting health and well-being of the individual;</li> <li>risks to the individual's health;</li> <li>changes the plan might have on the individual.</li> </ul> <p>A high standard of presentation and organisation has been demonstrated of the use of two measures using a wide range of suitable techniques.</p> |

**9.7 Evaluate evidence, make reasoned judgements, present conclusions accurately and appropriately.**

| <b>0 marks</b>                   | <b>1-4 marks</b>   | <b>5-8 marks</b>   | <b>9-12 marks</b>   | <b>13-16 marks</b>   |
|----------------------------------|--|--|---|--|
| <p>No work worthy of credit.</p> | <p>Evidence of interpretation and evaluation within the health plan will be minimal. The candidate's reasoned judgements may be limited in application and some decisions taken may not be appropriate in relation to some of the following:</p> <ul style="list-style-type: none"> <li>factors affecting health and well-being of the individual;</li> <li>risks to the individual's health;</li> <li>the use of two measures of health.</li> </ul> <p>The attempt to present conclusions on changes the plan may have on the individual will cover limited aspects only and may be simplistic.</p> | <p>Evidence of interpretation and evaluation within the health plan will be limited. The candidate has made an attempt to make reasoned judgements and taken some decisions which may not always be logical in relation to some or all of the following:</p> <ul style="list-style-type: none"> <li>factors affecting health and well-being of the individual;</li> <li>risks to the individual's health;</li> <li>the use of two measures of health.</li> </ul> <p>The attempt to present conclusions on changes the plan may have on the individual will cover some aspects only and may be limited.</p> | <p>A good attempt has been made to interpret and evaluate the health plan. The candidate has made some reasoned judgements and taken some logical decisions in relation to all of the following:</p> <ul style="list-style-type: none"> <li>factors affecting health and well-being of the individual;</li> <li>risks to the individual's health;</li> <li>the use of two measures of health.</li> </ul> <p>Reasonable conclusions on changes the plan may have on the individual are presented, covering most aspects.</p> | <p>Interpretation and evaluation of the health plan are thorough and objective. The candidate has made clear reasoned judgements and taken logical decisions throughout in relation to all of the following:</p> <ul style="list-style-type: none"> <li>factors affecting health and well-being of the individual;</li> <li>risks to the individual's health;</li> <li>the use of two measures of health.</li> </ul> <p>Critical and effective conclusions to changes the plan may have on the individual are presented, covering all aspects.</p> |

## 9.8 Essential Information for Teachers

This unit will be assessed entirely on a portfolio of evidence based on the candidate's own investigation of how to produce a health plan for improving or maintaining the physical health and well-being of an individual.

To fulfil these requirements candidates need to take part in a planned learning programme covering the knowledge, skills and understanding which are specified in the *What you need to Learn* section of the unit.

Centres should ensure that sufficient time is given to the teaching of the key terms and concepts contained within this unit before embarking on the portfolio.

## 9.9 Guidance on Delivery

This information in this section has been provided to assist teachers facilitate the students' acquisition of knowledge and understanding of promoting health and well-being. This guide must be read in conjunction with the unit specification (What You Need to Learn) and assessment evidence requirements to which it relates.

### Understanding health and well-being

A good starting point could be a student discussion to develop their own definition of health and well-being. Research regularly introduces new ideas on health and well-being and students should be encouraged to investigate any current issues that may be reported in the national media. It is important that students realise, however, that generalisation and headlines for media purposes may not be substantiated when viewing the research in detail. Cultural differences on health and well-being may reflect historical beliefs and/or access to the knowledge base of relevant information.

### Factors positively influencing health and well-being

Students should know the food components that are necessary for a balanced diet and in approximately what quantities/proportions they are required. Students should appreciate that the diet balance will alter throughout life. The physical, intellectual, emotional and social benefits of regular exercise should be covered. Similarly, the benefits of adequate financial resources and of stimulating work, education and leisure activity should cover physical, intellectual, emotional and social aspects of health and well-being.

Examples of screening procedures could be antenatal screening for chromosomal abnormalities, genetic disorders, anaemia in the mother-to-be or spina bifida in the foetus; infant and child screening tests such as those for dental care, deafness, hip dislocation or congenital heart disease and/or adult screening tests such as those for hypertension, glaucoma, breast or testicular cancer.

Vaccination should be understood as a main type of immunisation. Examples could include those protecting against measles, mumps and rubella (MMR), diphtheria, tetanus and/or hepatitis B.

Risk management procedures to protect individuals and promote personal safety may be studied on work experience placements and/or those in place at the student's school/college or when visiting suitable health and social care settings such as playgroups, day centre and/or residential homes.

Risks to health and well-being

Students should cover physical, intellectual, emotional and social effects on health and well-being for the risks specified in this section. Lifestyle factors over which people have some control are substance misuse, diet, stress, personal hygiene, physical exercise and sex. Lifestyle factors which people may not be able to change include genetically-inherited diseases and conditions, social isolation, poverty, inadequate housing, unemployment and environmental pollution.

Examples of genetically-inherited diseases and conditions include albinism, phenylketonuria, colour blindness, haemophilia and Huntington's chorea. Detailed understanding of the inheritance of these conditions is not expected.

Students should limit their work to the main physical, intellectual, emotional and social effects of substance misuse, given the vast amount of information available. Students should, therefore, be discouraged from duplicating verbatim from texts on these topics and group work may be suitable for covering the range of substances quickly and effectively. In this case, student presentations followed by question and answer sessions would be beneficial for each student to gain the knowledge and understanding they require.

Environmental pollutants can include poisons, micro-organisms, radioactive substances and/or excessive noise. There are well-documented incidences which can provide suitable case study materials, e.g. mercury waste in the Mina Mata Bay, Japan, dioxin release from a factory explosion in Italy and radioactive fallout from Chernobyl.

Indicators of Physical Health

It is intended that students should experience blood pressure, peak flow, body mass index and recovery pulse monitoring. For blood pressure, digital monitors can be obtained for student use or if using a sphygmomanometer, the services of a qualified practitioner will be required. Peak flow is best monitored using a peak flow meter, but can be measured with some spirometers. Simple exercises, such as step ups or stair walking can be used for resting and recovery pulse.

Health promotion and improvement methods

To understand how different health behaviours can help people achieve personal targets, students should relate back to their work on the factors that positively influence health and well-being. Students should be discouraged from merely obtaining health promotion leaflets of different types without working on them to show how they inform, motivate and support people who aim to improve their health and well-being.

Suggested Teaching Activities

- investigations and case studies, e.g. of a client's factors/risks to health and well-being
- video and audio recordings, e.g. risks to health
- presentations and oral explanations, e.g. of health promotion
- visiting speakers, e.g. health visitors, community nurses
- production of posters, photographs and other graphical material, e.g. physical health measures

- oral and written reports, e.g. factors/risks to well-being
- question and answer sessions, e.g. substance and misuse
- classroom discussions, e.g. definitions of health and well-being
- assignments and projects, e.g. for assessment evidence
- simulations and group work, e.g. for case studies of factors/risks to health and well-being
- producing media articles, e.g. on risks to health and well-being (newspaper/TV/radio programme materials).

#### Group work note

Group work is a useful way for obtaining information, e.g. on substance misuse, but it is important that individual students meet the assessment evidence requirements. Teachers assessing evidence will need to be convinced of its individual authenticity. Questions can be used in order to clarify validity, authenticity and sufficiency of evidence and under these circumstances the teacher assessor may wish to include a dated witness statement covering the evidence. It is expected that the use of such statements will be kept to a minimum so that they constitute a very minor part of submitted evidence.

### 9.10 Guidance on Assessment

This unit is assessed entirely through the portfolio evidence of a health improvement plan for a chosen individual. The chosen individual may be the student him or herself.

Candidates must collect their own information. It is not appropriate for centres to provide a Case Study for this unit. It is possible for more than one candidate to choose the same individual to investigate, but there must be reliable evidence that each candidate has independently satisfied the criteria they are claiming.

Assessors should bear in mind that a range of evidence is acceptable. Tables, charts and diagrams can be used if these provide reliable evidence and assessors can make use of candidates presenting oral evidence if this is fully and reliably assessed and recorded. Other forms of evidence may include audio and video recordings, OHTs and presenter notes. Signed witness statements should be included in the portfolio to validate the type of evidence which may result from questioning and/or oral presentations. It is expected that oral evidence will form only a very minor part of the evidence submitted.

The inability to produce extensive written evidence should not prevent candidates with a sound knowledge and understanding from achieving a standard commensurate with their knowledge and understanding.

Assessors must ensure that all candidates fulfil all assessment requirements for the chosen individual.

When assessing candidates' work, assessors should consider the level of attainment in three broad areas:

- the level of independence and originality in portfolio preparation
- the depth and breadth of understanding of the content of the unit
- the level of evaluation and analysis employed.

In the Assessment Marking Criteria mark ranges are given for each criterion. When assessing a candidate's portfolio work, for each criterion, teachers should first identify the range of marks within which that work falls, then use their professional judgement to decide which mark within that range best describes the depth and quality of the work. The candidate's total mark for the unit is determined by adding the marks for the different criteria. Further guidance about the marking process will be provided during teacher standardising meetings.

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### 9.11 Resources

It is important to use a range of different, up-to-date resources for teaching and learning purposes. These could include

- internet websites such as Health Development Agency, Department of Health, DEFRA
- health and social care textbooks
- Department of Health publications
- Department for Environment, Food and Rural Affairs (DEFRA)
- Benefits Agency
- local health promotion units
- local drugs advisory service
- local drugs action teams
- Action on Smoking and Health (ASH)
- health education authorities
- NHS executives
- GP surgeries and health centres
- local voluntary organisations, e.g. Shelter
- local supermarkets' healthy eating promotional leaflets.

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### 9.12 Key Skills Guidance

The guidance has been split into two sections: Keys to Attainment and Signposts. The two sections should be used in conjunction with each other.

#### Keys to Attainment

These are identified Key Skills or aspects of Key Skills that are central to vocational achievement. If a student has met the indicated vocational requirements of the Unit, the Key to Attainment shows that the relevant aspect of the Key Skill has also been achieved. A Key to Attainment does not negate the need for students to develop and practise the Key Skill during delivery.

#### Signposts

These are naturally-occurring opportunities for the development of Key Skills during teaching, learning and assessment. Students will not necessarily achieve the signposted Key Skills through the related vocational evidence. They will need to develop additional evidence elsewhere to ensure that the requirements of the Key Skills Units are met fully.

## 9.13 Communication Levels 1 and 2

## Keys to Attainment

| When students are:   | They will have achieved the following key skills evidence:   |   |
|--|--|---|
| <ul style="list-style-type: none"> <li>discussing and debating about the factors affecting health and well-being and how to improve health by positive circumstances and health promotion</li> <li>using health promotion literature from NHS trusts, local health authorities, textbooks, reports, newspaper supplements, etc.</li> </ul> | Level 1  | Level 2   |
|  | C1.1 Take part in a <b>one-to-one</b> discussion and a <b>group</b> discussion about different straightforward subjects.<br><br>C1.2 Read and obtain information from <b>two</b> different types of documents about straightforward subjects, including at least <b>one</b> image. | C2.1a Contribute to a discussion about a straightforward subject.<br><br>C2.2 Read and summarise information from <b>two</b> extended documents about a straightforward subject. One of the documents should include at least <b>one</b> image. |

## 9.14 Communication Levels 1 and 2

## Signposts

| If students are:   | There may be opportunities for them to develop the following key skills evidence:  |  |
|--|--|--|
| <ul style="list-style-type: none"> <li>using essays, newspaper articles, health promotion leaflets, posters, (also photos, diagrams and/or drawings) etc. to describe health and well-being, positive/negative influences</li> <li>presenting information to a group on different risks to health and well-being and/or ways of improving health.</li> </ul> | Level 1  | Level 2  |
|  | C1.3 Write <b>two</b> different types of documents about straightforward subjects. Include at least <b>one</b> image in <b>one</b> of the documents. | C2.1b Give a short talk about a straightforward subject, using an image.<br><br>C2.3 Write <b>two</b> different types of document about straightforward subjects. One piece of writing should be an extended document and include at least <b>one</b> image. |

9.15 Application of Number  
Levels 1 and 2

Signposts

|  |   |   |
|--|---|---|
| If students are:   | There may be opportunities for them to develop the following key skills evidence:   |   |
| <ul style="list-style-type: none"> <li>• taking and interpreting measurements of blood pressure, peak flow, BMI, pulse readings in graphical/other appropriate formats</li> <li>• measuring weight/height/pulse rate etc.; converting between systems</li> <li>• calculating ratios of, e.g. smoker v non-smokers in a given group</li> <li>• comparing sets of measured data statistically, e.g. average height of a group</li> <li>• calculating BMI</li> <li>• presenting recorded measurements, describing how and why they were taken, possibly providing statistical information about factors affecting health and well-being.</li> </ul> | Level 1   | Level 2   |
|  | <p>N1.1 Interpret straightforward information from <b>two</b> different sources. At least one source should be a table, chart, diagram or line graph.</p> <p>N1.2 a Carry out straightforward calculations to do with amounts and sizes.</p> <p>N1.2 b Carry out straightforward calculations to do with scales and proportion.</p> <p>N1.2 c Carry out straightforward calculations to do with handling statistics.</p> <p>N1.3 Interpret the results of calculations and present findings. At least <b>one</b> chart and <b>one</b> diagram must be used.</p> | <p>N2.1 Interpret information from <b>two</b> different sources, including material containing a graph.</p> <p>N2.2 a Carry out calculations to do with amounts and sizes.</p> <p>N2.2 b Carry out calculations to do with scales and proportions.</p> <p>N2.2 c Carry out calculations to do with handling statistics.</p> <p>N2.2d Carry out calculations to do with using formulae.</p> <p>N2.3 Interpret the results of calculations and present findings. At least <b>one</b> graph, <b>one</b> chart and <b>one</b> diagram must be used.</p> |

9.16 Information and Communication Technology  
Levels 1 and 2

Signposts

|  |  |   |
|--|--|---|
| If students are:   | There may be opportunities for them to develop the following key skills evidence:  |   |
| <ul style="list-style-type: none"> <li>• using given sources on the Internet, CD-ROMs, care services databases and other non-IT sources to obtain information about health trends, health risks, etc.</li> <li>• developing and reporting information in essays, leaflets, presentations etc., using WP and tables/flow charts/photos/drawings.</li> </ul> | Level 1  | Level 2   |
|  | <p>IT1.1 Find, explore and develop information for <b>two</b> different purposes.</p> <p>IT1.2 Present information for <b>two</b> different purposes. Work must include at least <b>one</b> example of text, <b>one</b> example of images and <b>one</b> example of numbers.</p> | <p>IT2.1 Search for and select information for <b>two</b> different purposes.</p> <p>IT2.3 Present combined information for <b>two</b> different purposes. Work must include at least <b>one</b> example of text, <b>one</b> example of images and <b>one</b> example of numbers.</p> |

## 9.17 Working with Others Levels 1 and 2

### Signposts

|  |   |   |
|--|---|---|
| If students are:   | There may be opportunities for them to develop the following key skills evidence:   |   |
| <ul style="list-style-type: none"> <li>• in groups, researching different health risks or factors affecting good health, acting with group and individual responsibility</li> <li>• assessing individual responsibility to group objectives, e.g. health risks/health promotion; evidence of safe and effective progression of straightforward tasks; seeking/providing support</li> <li>• discussing progress, identifying good ways of, e.g., finding information, dealing with problems, suggesting better ways of working together.</li> </ul> | Level 1   | Level 2   |
|  | <p>WO1.1 Confirm what needs to be done to achieve given objectives, including responsibilities and working arrangements.</p> <p>WO1.2 Work with others towards achieving given objectives, carrying out tasks to meet responsibilities.</p> | <p>WO2.1 Plan straightforward work with others, identifying objectives and clarifying responsibilities and confirm working arrangements.</p> <p>WO2.2 Work co-operatively with others towards achieving identified objectives, organising tasks to meet responsibilities.</p> |
|  | <p>WO1.3 Identify progress and suggest ways of improving work with others to help achieve given objectives.</p>   | <p>WO2.3 Exchange information on progress and agree ways of improving work with others to help achieve objectives.</p>  |

9.18 Improving own Learning and Performance Levels 1 and 2

Signposts

|   |   |  |
|---|---|--|
| If students are:  | There may be opportunities for them to develop the following key skills evidence:   |  |
| <ul style="list-style-type: none"> <li>• in a group allowing appropriate person to set individual targets/identify action points/deadlines/arrange meetings for reviewing progress/who to ask for help</li> <li>• following plan in LP1.1, seeking support where necessary, using different approaches to learning, including practical activity, e.g. monitoring blood pressure/setting health improvement targets; acting on suggestions for improvement</li> <li>• reviewing what has been learned (e.g. in tutorials) and how student tackled it on one-to-one basis, with encouragement to identify good/bad work and suggest improvements.</li> </ul> | Level 1   | Level 2  |
|   | <p>LP1.1 Confirm understanding of short-term targets and plan how these will be met, with the person setting them.</p> <p>LP1.2 Follow a plan, using support given by others to help meet targets. Improve performance by:</p> <p>studying a straightforward subject;</p> <p>learning through a straightforward practical activity.</p> <p>LP1.3 Review progress and achievements in meeting targets, with an appropriate person.</p> | <p>LP2.1 Help set short-term targets with an appropriate person and plan how these will be met.</p> <p>LP2.2 Take responsibility for some decisions about learning, using a plan and support from others to help meet targets. Improve performance by:</p> <p>studying a straightforward subject;</p> <p>learning through a straightforward, practical activity.</p> <p>LP2.3 Review progress with an appropriate person and provide evidence of achievements, including how learning from one task to meet the demands of a new task has been used.</p> |

## 9.19 Problem-Solving Levels 1 and 2

### Signposts

|   |  |   |
|---|--|---|
| If students are:  | There may be opportunities for them to develop the following key skills evidence:  |   |
| <ul style="list-style-type: none"> <li>• carrying out a physical health assessment and developing a health improvement plan; identifying health risks and other factors affecting well-being; providing suggestions for solution to issues highlighted in assessment</li> <li>• implementing a health improvement plan, making any necessary adjustments to objectives/methods; taking advice from, e.g. teacher/tutor/family member</li> <li>• accurately measuring changes to check positive/negative results; explaining stages in plan/reasons for decisions taken, evaluating decisions, suggesting improvements.</li> </ul> | Level 1  | Level 2   |
|   | <p>PS1.1 Confirm understanding of the given problem with an appropriate person and identify <b>two</b> options for solving it.</p> <p>PS1.2 Plan and try out at least <b>one</b> option for solving the problem, using advice and support given by others.</p> | <p>PS2.1 Identify a problem and come up with <b>two</b> options for solving it.</p> <p>PS2.2 Plan and try out at least <b>one</b> option for solving the problem, obtaining support and making changes to plan when needed.</p> |
|   | <p>PS1.3 Check if the problem has been solved by following given methods and describe the results including ways to improve approach to problem-solving.</p>   | <p>PS2.3 Check if the problem has been solved by following given methods, describe results and explain approach to problem-solving.</p>   |

## Subject Content

10

### GCSE in Health and Social Care *Unit 3* *Understanding Personal Development and Relationships*

#### 10.1 About this Unit

You will learn about:

- the stages and pattern of human growth and development
- the different factors that can affect human growth and development
- the development of self-concept and personal relationships
- major life changes and how people deal with them
- the role of relationships in personal development.

Health, social care and Early Years workers need to know about the different ways that people grow and develop during their lives. This unit will help you to find out about the process of human growth and development and the different factors that can affect an individual's experience.

This unit is assessed through an external test. Your overall result for the unit will be reported as a mark on the Uniform Mark Scale, see section 18.

#### 10.2 What you need to Learn

Human growth and development

**Key issue:** How do individuals grow and develop during each life stage?

You should know that growth refers to an increase in physical size (mass and height) and that development is concerned with the emergence and increase in sophistication of skills, abilities and emotions. You should be able to describe the expected patterns of physical growth and change and the physical, social, intellectual and emotional developments that typically take place during each of the five main life stages. These are:

- infancy (0-3)
- childhood (4-10)
- adolescence (11-18)
- adulthood (19-65)
- later adulthood (65+).

## Factors that affect growth and development

**Key issue:** What factors affect human growth and development and how can they influence an individual's health, well-being and life opportunities?

You should understand, and be able to give examples of, factors that cause individual differences in patterns of growth and development. These include:

- **physical factors** including genetic inheritance, diet, amount and type of physical activity, experience of illness or disease
- **social and emotional factors** including, gender, family relationships, friendships, educational experiences, employment/unemployment, ethnicity and religion, life experiences such as birth, marriage, death and divorce
- **economic factors** including income and material possessions
- **environmental factors** including housing conditions, pollution, access to health and welfare services.

You should understand how these factors can interrelate and how they can affect a person's:

- self-esteem
- physical and mental health
- employment prospects
- level of education.

## Effects of relationships on personal development

**Key issue:** What effect do relationships have on an individual's personal development?

Throughout their lives, people have many different sorts of relationship. These include:

- family relationships (with parents, siblings and as parents, for example.)
- friendships
- intimate personal and sexual relationships
- working relationships (including teacher/student, employer/employee, peers, colleagues).

You should know which relationships play a key part in an individual's social and emotional development during each life stage. You should be able to identify how these relationships can have a positive or negative effect on personal development. You will also need to identify what effect abuse, neglect and lack of support can have on personal development.

Self-concept

**Key issue:** What factors influence the development of a person's self-concept?

All people have a view of themselves, known as their self-concept. This is based on the beliefs that they have about themselves as a person and also on what they believe others think about them. You should know how a person's self-concept is affected by factors such as their:

- age
- appearance
- gender
- culture
- emotional development
- education
- relationships with others
- sexual orientation
- life experiences.

The effects of life events on personal development

**Key issue:** How can life events affect an individual's personal development?

Life events are expected or unexpected experiences that can have a major impact on an individual's personal development. These may include events that result in:

- relationship changes (marriage, divorce, living with a partner, birth of a sibling or own child, death of a friend or relative)
- physical changes (for example, puberty, accident or injury, menopause)
- changes in life circumstances (for example, moving house, starting school, college or a job, retirement, redundancy or unemployment).

You should be able to identify and describe the effects that such examples of expected and unexpected life events can have on individuals' personal development. You should know how individuals adapt and use sources of support to cope with the effects of life events. Sources of support may include:

- partners, family and friends
- professional carers and services
- voluntary and faith-based services.

**10.3 Assessment Requirements**

This unit is assessed externally by a written examination and no portfolio evidence is required. The questions will be a mixture of short-answer, structured and free response. There is no tiering and all candidates will sit the same paper with grades A\* to G being available.

20 – 40% of the questions will relate to Assessment Objective 1 – recall and apply knowledge, skills and understanding specified in the subject content in a range of vocationally-related situations.

60 – 80% of the questions will relate to Assessment Objective 3 – evaluate evidence, make reasoned judgements and present conclusions accurately and appropriately.

**10.4 Guidance on Delivery**

The information in this section has been provided to assist teachers facilitate their students' acquisition of knowledge and understanding of human growth and development, the different factors that affect it, the development of self-concept and personal relationships and the role of those relationships in personal development and major life changes and how people deal with them. This guide must be read in conjunction with the unit specification (What You Need to Learn) and assessment evidence requirements to which it relates.

**Human growth and development**

Students should understand that human growth and development is a continuous process which is described for convenience in identifiable land mark stages. It is important that physical, intellectual, emotional and social developments are covered for all five main life stages. There is great variation in the amount of information readily available for different developments at different life stages, e.g. there is a great deal of detail on physical aspects of infancy but much less so perhaps for emotional aspects of adulthood. Students should therefore ensure that they understand the main features of all these different aspects of development at each life stage.

Given that students will study 'normal' development through the life stages, it is important that they realise that this offers a stereotypical view from which individuals will vary. Variants from the stereotype should not automatically be viewed as 'abnormal'.

Students often find difficulty distinguishing between emotional and social aspects of development as the two can be interrelated. Teachers may wish to present suitable examples to students in order to facilitate their understanding, e.g. social isolation affecting emotional development.

**Factors that affect growth and development**

Students will be required to differentiate between different factors and identify them as either physical, social and emotional, economic and/or environmental. Students must understand that factors interrelate to affect a person's growth and development, e.g. income (economic) often interrelates with housing conditions (environmental) to affect health and well-being. Students must also not just be able to describe the factors, but must be able to demonstrate understanding of the influence they have on individuals.

|  |  |
|--|--|
|  | <p>Students will inevitably draw from their own experiences when working on this section. It is necessary for students to understand that relationships can be complex and multi-faceted. Teachers may wish to supply illustrated case studies and scenarios for students to study and video extracts from current ‘soap’ series on TV will provide a rich source of material. As in the previous section, students must be able to describe not merely different relationships but must also understand the effects they may have on personal development.</p>  |
| Self concept                                       | <p>It is important for students not to be given negative messages about their own development which can lead to difficulties relating to their self concept. Teachers will, therefore, need to approach this area of the work with sensitivity and caution. Video material may prove useful here. Students will be required to identify the range of different factors which influence the development of self concept and understand that a person’s view of themselves can on, occasion, be quite different from those around them.</p>  |
| The effects of life events on personal development | <p>Students should be able to identify life events which are expected such as starting school, work, leaving home and marriage from those which are unexpected such as loss of employment, serious illness, accident, divorce, bereavement. Students will need to understand how these different events may have a major impact on an individual. In this respect it is worth attempting to consider the event in terms of physical, intellectual, emotional and/or social aspects. Teachers will need to be sensitive to individual students’ personal experiences in this work. Students will inevitably draw from their personal experience when seeking to understand different events and the sources of support that may have been involved.</p> |
| Suggested Teaching Activities                      | <ul style="list-style-type: none"><li>• video and audio recordings, e.g. ‘soap’ series for relationships</li><li>• presentations and oral explanations, e.g. of P.I.E.S.</li><li>• investigations and case studies, e.g. of physical growth</li><li>• visiting speakers, e.g. health visitors</li><li>• production of posters, photographs and other graphical material, e.g. interrelationships</li><li>• classroom discussions, e.g. expected and unexpected life events</li><li>• question and answer sessions, e.g. self concept</li><li>• student self and peer assessment, e.g. of presentations and oral explanations</li></ul>   |
| Resources  | <p>It is important to use a range of different, up-to-date resources for teaching and learning purposes. These could include:</p> <ul style="list-style-type: none"><li>• health and social care textbooks</li><li>• health and social care professionals</li><li>• developmental charts and tests</li><li>• TV ‘soap’ programmes</li><li>• case studies</li></ul>   |

---

**10.5 Guidance on Assessment**

This unit will be assessed entirely through an external examination lasting 1½ hours. Candidates will be required to respond to short-answer, structured and free response questions drawn from topics detailed in the *'What You Need to Learn'* section, i.e.

human growth and development

factors that affect growth and development

the effects of relationships on personal development

self concept

the effects of life events on personal development

Candidates will be expected to apply their knowledge and understanding to different vocationally-related scenarios and to evaluate the information from those scenarios 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.

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**10.6 Key Skills Guidance**

The guidance has been split into two sections: Keys to Attainment and Signposts. The two sections should be used in conjunction with each other.

**Keys to Attainment**

These are identified Key Skills or aspects of Key Skills that are central to vocational achievement. If a student has met the indicated vocational requirements of the Unit, the Key to Attainment shows that the relevant aspect of the Key Skill has also been achieved. A Key to Attainment does not negate the need for students to develop and practise the Key Skill during delivery.

**Signposts**

These are naturally-occurring opportunities for the development of Key Skills during teaching, learning and assessment. Students will not necessarily achieve the signposted Key Skills through the related vocational evidence. They will need to develop additional evidence elsewhere to ensure that the requirements of the Key Skills Units are met fully.

## 10.7 Communication Levels 1 and 2

### Keys to Attainment

|   |  |   |
|---|--|---|
| When students are:  | They will have achieved the following key skills evidence:   |   |
| <ul style="list-style-type: none"> <li>discussing and debating about factors affecting personal development, including relationships; discussing self-concept, social issues reflected in beliefs about self and others.</li> </ul> | Level 1  | Level 2   |
|   | C1.1 Take part in a <b>one-to-one</b> discussion and a <b>group</b> discussion about different straightforward subjects. | C2.1a Contribute to a discussion about a straightforward subject. |

## 10.8 Communication Levels 1 and 2

### Signposts

|   |   |   |
|---|---|---|
| If students are:  | There may be opportunities for them to develop the following key skills evidence:   |   |
| <ul style="list-style-type: none"> <li>using textbooks on growth and development, support material from local/health authorities, e.g. on coping with bereavement/dealing with puberty, etc.</li> <li>writing essays on appearance/culture, case studies/newspaper articles on growth/development; analysing relationships/self-concept/effect of life events.</li> </ul> | Level 1   | Level 2   |
|   | <p>C1.2 Read and obtain information from <b>two</b> different types of documents about straightforward subjects, including at least <b>one</b> image.</p> <p>C1.3 Write <b>two</b> different types of documents about straightforward subjects. Include at least <b>one</b> image in <b>one</b> of the documents.</p> | <p>C2.1b Give a short talk about a straightforward subject, using an image.</p> <p>C2.2 Read and summarise information from <b>two</b> extended documents about a straightforward subject. One of the documents should include at least <b>one</b> image.</p> <p>C2.3 Write <b>two</b> different types of document about straightforward subjects. One piece of writing should be an extended document and include at least <b>one</b> image.</p> |

## 10.9 Application of Number Levels 1 and 2

There are no obvious opportunities for the development or assessment of this key skill in this unit.

### 10.10 Information and Communication Technology Levels 1 and 2

Signposts

|  |   |  |
|--|---|--|
| If students are:   | There may be opportunities for them to develop the following key skills evidence:   |  |
| <ul style="list-style-type: none"> <li>developing and reporting information in essays, leaflets, presentations etc., using WP and graphs, pictures or maps.</li> </ul> | Level 1   | Level 2  |
|  | IT1.2 Present information for <b>two</b> different purposes. Work must include at least <b>one</b> example of text, <b>one</b> example of images and <b>one</b> example of numbers. | IT2.3 Present combined information for <b>two</b> different purposes. Work must include at least <b>one</b> example of text, <b>one</b> example of images and <b>one</b> example of numbers. |

### 10.11 Working with Others Levels 1 and 2

Signposts

|  |   |   |
|--|---|---|
| If students are:   | There may be opportunities for them to develop the following key skills evidence:                                     |   |
| <ul style="list-style-type: none"> <li>in groups, researching different stages of development, factors affecting growth/development, acting with group and individual responsibility</li> <li>assessing individual responsibility to group objectives, e.g. particular stage of development/effect of economic factor on development; evidence of safe and effective progression of straightforward tasks; seeking/providing support</li> <li>discussing progress, identifying good ways of, e.g. finding information, dealing with problems, suggesting better ways of working together.</li> </ul> | Level 1   | Level 2   |
|  | WO1.1 Confirm what needs to be done to achieve given objectives, including responsibilities and working arrangements. | WO2.1 Plan straightforward work with others, identifying objectives and clarifying responsibilities and confirm working arrangements. |
|  | WO1.2 Work with others towards achieving given objectives, carrying out tasks to meet responsibilities.               | WO2.2 Work co-operatively with others towards achieving identified objectives, organising tasks to meet our responsibilities.         |
|  | WO1.3 Identify progress and suggest ways of improving work with others to help achieve given objectives.              | WO2.3 Exchange information on progress and agree ways of improving work with others to help achieve objectives.                       |

**10.12 Improving own Learning and Performance**  
Levels 1 and 2

Signposts

|   |  |   |
|---|--|---|
| If students are:  | There may be opportunities for them to develop the following key skills evidence:  |   |
| <ul style="list-style-type: none"> <li>working in a group allowing appropriate person to set individual targets/identify action points/deadlines/arrange meetings for reviewing progress/who to ask for help</li> <li>reviewing what has been learned (e.g. in tutorials) and how student tackled it on one-to-one basis, with encouragement to identify good/bad work and suggest improvements.</li> </ul> | <p>LP1.1 Confirm understanding of short-term targets and plan how these will be met, with the person setting them.</p> <p>LP1.3 Review progress and achievements in meeting targets, with an appropriate person.</p> | <p>LP2.1 Help set short-term targets with an appropriate person and plan how these will be met.</p> <p>LP2.3 Review progress with an appropriate person and provide evidence of achievements, including how learning from one task to meet the demands of a new task has been used.</p> |

**10.13 Problem-Solving**  
Levels 1 and 2

There are no obvious opportunities for the development or assessment of this key skill in this unit.

# Key Skills and Other Issues

## 11

## Key Skills

### 11.1 Introduction

The Key Skills qualification requires candidates to demonstrate levels of achievement in the Key Skills of *Application of Number, Communication and Information Technology*.

The units for the 'wider' Key Skills of *Improving own Learning and Performance, Working with Others* and *Problem-Solving* are also available. The acquisition and demonstration of ability in these 'wider' Key Skills is deemed highly desirable for all candidates, but they do not form part of the Key Skills qualification.

Copies of the Key Skills units may be downloaded from the QCA website (<http://www.qca.org.uk//keyskills>).

Copies of the Key Skills specification may be downloaded from the AQA Website ([www.aqa.org.uk](http://www.aqa.org.uk)).

### 11.2 Teaching, Developing and Providing Opportunities for Generating Evidence

Opportunities for Key Skills development and assessment are indicated within each unit. In addition, a grid which summarises the wider opportunities across the qualification as a whole is provided.

Key Skills links are identified in two ways: Key Skills Signposting and Keys to Attainment.

Key Skills Signposting indicates naturally-occurring opportunities for the development of Key Skills during teaching, learning and assessment. Students will not necessarily achieve the signposted Key Skill through the related vocational evidence.

Keys to Attainment, where appropriate, are identified Key Skills or aspects of Key Skills which are central to vocational achievement. If a student has met the indicated vocational requirements of the Unit, the specified Key to Attainment shows that the relevant aspect of the Key Skill has also been achieved. A Key to Attainment does not negate the need for students to develop and practise the Key Skill during teaching and learning.

A Table summarising the Key Skills opportunities is given in Appendix D. Details are to be found in each Unit.

# 12

## Spiritual, Moral, Ethical, Social, Cultural and Other Issues

### 12.1 Spiritual, Moral, Ethical, Social and Cultural Issues

GCSE in Health and Social Care (Double Award) offers a wide range of opportunities for the exploration of spiritual, moral, ethical, social and cultural issues.

Further details are provided in Appendix E.

### 12.2 European Dimension

AQA has taken account of the 1988 Resolution of the Council of the European Community in preparing this specification and associated specimen paper. European examples should be used where appropriate in the delivery of the subject content. Relevant European legislation is identified within the specification, where applicable.

Further details are provided in Appendix E.

### 12.3 Environmental Issues

AQA has taken account of the 1988 Resolution of the Council of the European Community and the Report *“Environmental Responsibility: An Agenda for Further and Higher Education”* 1993 in preparing this specification and associated specimen paper.

Further details are provided in Appendix E.

### 12.4 Health and Safety

This specification will encourage the development of a sense of responsibility for the health and safety of the self and others. Particular opportunities should be exploited to promote these issues.

### 12.5 Citizenship

This specification will assist with the development of students’ reflection on and sense of social and moral responsibility. Opportunities will be available for the development of knowledge and understanding of responsibilities. The specification will assist with the development of the skill of enquiry and communication of topical issues.

Further details are provided in Appendix E.

### 12.6 Avoidance of Bias

AQA has taken great care in the preparation of this specification and associated specimen paper to avoid bias of any kind.

### 12.7 Issues for Centres in Wales and Northern Ireland

Terms, legislation or aspects of government that are different from those in England should not disadvantage students in Wales or Northern Ireland. Where such situations might occur, including in the external test, the terms used have been selected as neutral, so that programmes can be developed to reflect local and regional circumstances.

## Centre-Assessed Components

**13**

### Guidance on Setting Centre-Assessed Components

**13.1 Portfolio Advisors**

Advisors will be available to assist centres with any matters relating to portfolio units. Details will be provided when AQA knows which centres are following the specification.

**14**

### Supervision and Authentication

**14.1 Supervision of Candidates' Work**

Candidates' work for assessment must be undertaken under conditions which allow the teacher to supervise the work and enable the work to be authenticated. If it is necessary for some assessed work to be done outside the centre, sufficient work must take place under direct supervision to allow the teacher to authenticate each candidate's whole work with confidence.

**14.2 Guidance by the Teacher**

The awarding body must require internal teacher assessors to record full details of the nature of any assistance given to individual candidates that is beyond that of the teaching group as a whole, but within the parameters laid down by the specification. Any assistance given to an individual candidate which is beyond that given to the group as a whole must be recorded on the Candidate Record Form. (see Appendix B).

**14.3 Unfair Practice**

At the start of the course, the supervising teacher is responsible for informing candidates of the AQA Regulations concerning malpractice. Candidates must not take part in any unfair practice in the preparation of portfolio work to be submitted for assessment, and must understand that to present material copied directly from books or other sources without acknowledgement will be regarded as deliberate deception. Centres must report suspected malpractice to AQA. The penalties for malpractice are set out in the AQA Regulations.

**14.4 Authentication of Candidates' Work**

Both the candidate and the teacher are required to sign declarations confirming that the work submitted for assessment is the candidate's own. The teacher declares that the work was conducted under the specified conditions, and records details of any additional assistance.

## Standardisation

### 15.1 Standardising Meetings

Annual standardising meetings will usually be held in the autumn term. Centres entering candidates for the first time must send a representative to the meetings. Attendance is also mandatory in the following cases:

- where there has been a serious misinterpretation of the specification requirements;
- where the nature of portfolio unit tasks set by a centre has been inappropriate;
- where a significant adjustment has been made to a centre's marks in the previous year's examination.

Otherwise attendance is at the discretion of centres. At these meetings support will be provided for centres in the development of appropriate portfolio unit tasks and assessment procedures.

### 15.2 Internal Standardisation of Marking

The centre is required to standardise the assessment across different teachers and teaching groups and within and across units to ensure that all work at the centre has been judged against the same standards. If two or more teachers are involved in marking units, one teacher must be designated as responsible for internal standardisation. Common pieces of work must be marked on a trial basis and differences between assessments discussed at a training session in which all teachers involved must participate. The teacher responsible for standardising the marking must ensure that the training includes the use of reference and archive materials such as work from a previous year or examples provided by AQA. The centre is required to send to the moderator the Centre Declaration Sheet duly signed to confirm that the marking of portfolio work at the centre has been standardised. If only one teacher has undertaken the marking, that person must sign this form. A specimen Centre Declaration Sheet appears in Appendix B.

## 16

## Administrative Procedures

- 
- 16.1 Recording Assessments within each portfolio unit** The candidates' work must be marked according to the assessment criteria. Teachers should keep records of their assessments during the course in a format which facilitates the complete and accurate submission of the final overall assessments at the end of the course on the Candidate Record Forms. A specimen Candidate Record Form appears in Appendix B.
- 
- 16.2 Submitting Marks and Sample Work for Moderation** For each portfolio unit a mark for each candidate must be submitted to AQA by the date specified. Centres will be informed which portfolio units are required to be submitted in the samples to the moderator.
- 
- 16.3 Problems with Individual Candidates** Teachers should be able to accommodate the occasional absence of candidates by ensuring that the opportunity is given for them to make up missed assessments.
- Special consideration should be requested for candidates whose work has been affected by illness or other exceptional circumstances. Information about the procedure is issued separately by AQA and centres should ask for a copy of *Regulations and Guidance relating to Candidates with Particular Requirements*.
- If work is lost, AQA should be notified immediately of the date of the loss, how it occurred, and who was responsible for the loss. AQA will advise on the procedures to be followed in such cases.
- Where special help which goes beyond normal learning support is given, AQA must be informed so that such help can be taken into account when assessment and moderation take place.
- Candidates who move from one centre to another during the course sometimes present a problem for a scheme of internal assessment. Possible courses of action depend on the stage at which the move takes place. If the move occurs early in the course the new centre should take responsibility for assessment. If it occurs late in the course it may be possible to accept the assessments made at the previous centre. Centres should contact AQA at the earliest possible stage for advice about appropriate arrangements in individual cases.
- 
- 16.4 Retaining Evidence and Re-Using Marks** The centre must retain the work of candidates, with Candidate Record Forms attached, under secure conditions, from the time it is assessed, to allow for the possibility of an enquiry upon results. The work may be returned to candidates after the issue of results provided that no enquiry upon results is to be made which will include re-moderation of the work in the portfolio unit(s). If an enquiry upon result is to be made, the work must remain under secure conditions until requested by AQA.
-

## Moderation

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### 17.1 Moderation Procedures

Moderation of the portfolio work is by inspection of a sample of candidates' work by a moderator appointed by AQA. The centre marks must be submitted to AQA by the specified date. The moderator will normally inspect the work either by visiting the centre or by receiving the sample by post.

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### 17.2 Post-Moderation Procedures

On publication of the GCSE results, the centre is supplied with details of the final marks for the portfolio units.

Where moderation is not by a visit, the candidates' work is returned to the centre after the examination. At the same time as the issue of results the centre receives a report form giving feedback on the appropriateness of the tasks set, the accuracy of the assessments made, and the reasons for any adjustments to the marks.

Some candidates' work may be retained by AQA for archive purposes.

# Awarding and Reporting

## 18

## Grading, Shelf-Life and Re-Sits

### 18.1 Grading System

Individual assessment unit results will be reported.

All the GCSE qualifications will be graded on an eight grade scale, A\*, A, B, C, D, E, F and G. Candidates who fail to reach the minimum standard for grade G for the qualification will be recorded as U (unclassified) and will not receive a qualification certificate. The performance of candidates will be recorded as a double award i.e. A\*A\*, AA, BB etc. on the qualification certificate.

### 18.2 Marking of each unit

Each internally-assessed unit contains its own set of marking criteria, contextualised specifically to the content of that unit.

Each externally-assessed unit will have a marking scheme and assessment grid that shows how the questions address one or more assessment objectives. An example is provided in the specimen assessment materials.

### 18.3 Internally-assessed units

A candidate's work for an **internally-assessed unit** must aim to cover the Assessment Requirements specified.

In the Assessment Marking Criteria mark ranges are given for each criterion. When assessing a candidate's portfolio work, for each criterion teachers should first identify the range of marks within which that work falls, then use their professional judgement to decide which mark within that range best describes the depth and quality of the work. The candidate's total mark for the unit is determined by adding the marks for the different criteria. Further guidance about the marking process will be provided during teacher standardising meetings.

The raw mark out of 50 will be scaled to a range of 100 uniform marks. The ranges of uniform marks available for each grade are as follows:

|      | U    | G     | F     | E     | D     | C     | B     | A     | A*     |
|------|------|-------|-------|-------|-------|-------|-------|-------|--------|
| Unit | 0-19 | 20-29 | 30-39 | 40-49 | 50-59 | 60-69 | 70-79 | 80-89 | 90-100 |

Further guidance about how to allocate a precise number of raw marks per unit will be provided in forthcoming teacher standardising meetings. A candidate's work can be awarded a raw mark at the bottom of the mark range that results in a Grade U award for that unit, if that is to be the candidate's final attempt at that unit. These marks will be converted to UMS and count towards the total UMS score like all others.

**18.4 Grading of each Unit**

For both internally- and externally-assessed units, the minimum raw mark for each grade will be recommended by an awarding committee. The boundary decisions will be reported to centres for each unit at each assessment opportunity. For both internally- and externally-assessed units candidates' raw marks will be converted by AQA to uniform marks, which will be reported to the centre.

**18.5 Qualification**

The number of UMS achieved by the candidate for each unit is recorded and added to those for the other two units to give an overall uniform marks total. This total for the qualification is then compared to the ranges allocated to each grade.

|                           | U    | G     | F      | E       | D       | C       | B       | A       | A*      |
|---------------------------|------|-------|--------|---------|---------|---------|---------|---------|---------|
| UMS per Unit              | 0-19 | 20-29 | 30-39  | 40-49   | 50-59   | 60-69   | 70-79   | 80-89   | 90-100  |
|                           | U    | GG    | FF     | EE      | DD      | CC      | BB      | AA      | A*A*    |
| UMS for the Qualification | 0-59 | 60-89 | 90-119 | 120-149 | 150-179 | 180-209 | 210-239 | 240-269 | 270-300 |

Hence, a candidate will be awarded both an **overall qualification grade** (based on total uniform marks) recorded twice on the certificate, i.e. A\*A\* - GG, and **individual unit uniform marks**.

**18.6 Shelf-Life of Unit Results**

The shelf-life of individual unit results, prior to certification of the qualification, is limited only by the shelf-life of the specification.

**18.7 Assessment Unit Re-Sits**

Each assessment unit may be re-sat once only. The better result will count towards the final award. Candidates may, however, re-sit the whole qualification more than once.

**18.8 Minimum Requirements**

Candidates do not have to achieve a grade G or better on every unit to achieve overall qualification certification. Candidates will be graded on the basis of the work submitted for the award of the qualification.

**18.9 Quality Assurance**

The process for both internal and external assessment (including the mechanism for the aggregation of grades) for this qualification will conform to agreed procedures of the Code of Practice. AQA is committed to the maintenance of national standards and will provide advice about, and moderate, the assessment of candidates' work in centres.

# Appendices

## A

### Grade Descriptions

The following grade descriptions indicate the level of attainment characteristic of the given grade for GCSE. They give a general indication of the required standard at each specified grade. The descriptions should be interpreted in relation to the content and assessment evidence requirements outlined in the specification; they are not designed to define that content.

The grade awarded will depend in practice upon the extent to which the candidate has met the assessment evidence requirements overall. Shortcomings in some aspects of the assessment may be balanced by better performance in others.

**Grade A** Candidates can recall and apply knowledge and understanding of complex aspects of health and social care. They select appropriately and use complex information from primary and secondary sources. They recall and apply complex vocational knowledge competently.

Candidates plan and carry out independently a wide range of investigations and tasks. They demonstrate a high level of competence in the selection and use of a wide range of sources leading to a comprehensive analysis. Candidates select and use an appropriate range of methods, sources, information and data to find out about issues or topics, building in critical evaluation when appropriate. They review systematically the evidence available, presenting information clearly, accurately and precisely, leading to carefully-reasoned and appropriate conclusions.

**Grade C** Candidates can recall knowledge and understanding of relevant aspects of health and social care. They select appropriately and use information from primary and secondary sources. They recall and apply relevant vocational knowledge.

Candidates plan and carry out a range of investigations and tasks with only limited assistance. They make careful use of information selected from a wide range of sources leading to an analysis. Candidates select and use a range of methods, sources, information and data to find out about issues or topics, building in some opportunities for evaluation. They review some of the evidence available, presenting information clearly, with some evidence of accuracy and precision, leading to appropriate conclusions.

Grade F Candidates can recall knowledge and understanding of basic aspects of health and social care. They use information from primary and secondary sources. They recall basic vocational knowledge.

Candidates plan and carry out a range of investigations and tasks for which some support and guidance have been provided. They make use of information from a limited range of sources leading to some basic analysis. Candidates select and use a limited range of methods, sources, information and data in a restricted manner to find out about issues or topics. They collect a range of evidence, leading to restricted conclusions.

**B**

## Record Forms



# Centre-assessed work Centre Declaration Sheet Series/Year

Specification Title: ..... Unit Code: .....

Centre Name: ..... Centre No: .....

### Authentication

This is to certify that marks have been awarded in accordance with the requirements of the specification and that every reasonable step has been taken to ensure that the work presented is that of the candidates named. Any assistance given to candidates beyond that given to the class as a whole and beyond that described in the specification has been recorded on the Candidate Record Form(s) and has been taken into account. The marks given reflect accurately the unaided achievement of the candidates.

*Signature(s) of teacher(s) responsible for assessment*

Teacher 1 ..... Teacher 2 .....

Teacher 3 ..... Teacher 4 .....

Teacher 5 ..... Teacher 6 .....

(Continue overleaf if necessary)

### Internal Standardisation of Marking

Each centre must standardise the assessments for this unit across different teachers and teaching groups to ensure that all candidates in the centre have been judged against the same standards. If two or more teachers are involved in marking a unit, one of them must be designated as responsible for standardising the marking of all teachers at the centre who mark the unit.

The following declaration must be signed by the teacher responsible for ensuring standardisation. If all the work has been marked by the same person, that person should sign below.

I confirm that (please delete as appropriate):

- (a) \*I have marked the work of all candidates for this component;
- (b) \*the procedure described in the specification has been followed at this centre to ensure that the marking is of the same standard for all candidates.

Signed: ..... Date: .....

Signature of Head of Centre ..... Date: .....

*This form should be completed and sent to the moderator with the sample of centre-assessed work.*



Centre-assessed work  
**Candidate Record Form**  
Series/Year

**GCSE Health and Social Care (Double Award) 3821**

Centre Name: ..... Centre No: 

|  |  |  |  |  |
|--|--|--|--|--|
|  |  |  |  |  |
|--|--|--|--|--|

Candidate Name: ..... Candidate No: 

|  |  |  |  |
|--|--|--|--|
|  |  |  |  |
|--|--|--|--|

*This side is to be completed by the candidate.*

**Sources of advice and information**

1. Any help or information you have received from people other than your subject teacher(s) must be clearly identified in the work itself.
2. Any books, information leaflets or other materials (e.g. videos, software packages or information from the Internet) which you have used to help you complete this work must be clearly acknowledged in the work itself. To present material copied from books or other sources without acknowledgement will be regarded as deliberate deception.

**NOTICE TO CANDIDATE**

The work you submit for assessment must be your own.

**If you copy from someone else or 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 any help from other people apart from that which I have declared in the work itself. I have acknowledged all source materials in the work itself.

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

*This form should be completed on each occasion when the candidate submits portfolio work for assessment in this specification. The form should be attached to the candidate's work and retained at the centre or sent to the moderator as required.*

*PTO*

*This side is to be completed by the teacher/assessor.*

Marks must be awarded in accordance with the instructions and criteria in the Subject Content section of the specification.

Supporting information to show how the marks have been awarded should be given in the form of annotations on the candidate's work.

Please complete the boxes to show the marks awarded and add any summative comments which seem appropriate in the space below.

| Unit 1 | Criteria for the award of marks | Maximum mark | Mark awarded |
|--------|---------------------------------|--------------|--------------|
|        | Knowledge and Understanding     | 12           |              |
|        | Investigations and Tasks        | 22           |              |
|        | Evaluation                      | 16           |              |
|        | Total                           | 50           |              |

| Unit 2 | Criteria for the award of marks | Maximum mark | Mark awarded |
|--------|---------------------------------|--------------|--------------|
|        | Knowledge and Understanding     | 12           |              |
|        | Investigations and Tasks        | 22           |              |
|        | Evaluation                      | 16           |              |
|        | Total                           | 50           |              |

Concluding comments

**Details of additional assistance given (if any)**  
 Record here details of any assistance given to this candidate which is beyond that given to the class as a whole and beyond that described in the specification. Continue on a separate sheet if necessary.

Teacher/assessor's signature: ..... Date: .....

# C

## Overlaps with Other Qualifications

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
|     |   |   |
|-----|---|---|
| C.1 | GCSEs   | Content may overlap with GCSE <i>Home Economics (Child Development)</i> , GCSE <i>Home Economics (Food and Nutrition)</i> and GCSE <i>in Applied Science (Double Award)</i> .   |
| C.2 | GNVQs   | Content may overlap with six-unit Foundation and Intermediate GNVQ in <i>Health and Social Care, Hospitality and Catering</i> and <i>Science</i> .  |
| C.3 | Relationship with National Occupational Standards | Where a clear relationship exists with national occupational standards, details are stated in the <i>About This Unit</i> section of the specification. AQA GCSE in Health and Social Care (Double Award) has links with NVQs in <i>Care, Early Years Care and Education</i> , and <i>Caring for Children and Young People</i> . |

















































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**D**

## Summary of Key Skills Opportunities

The Key Skills are shown within each unit as either Keys to Attainment or Signposts where appropriate. The grid below indicates coverage across the qualification.

 = Keys to Attainment     = Signposts

| Level 1         |   |   |   | Level 2         |   |   |   |
|-----------------|---|---|---|-----------------|---|---|---|
| Key Skills ref. | Unit 1  | Unit 2  | Unit 3*   | Key Skills ref. | Unit 1  | Unit 2  | Unit 3*   |
| C1.1            |    |    |    | C2.1a           |    |    |    |
|                 |   |   |   | C2.1b           |    |    |    |
| C1.2            |    |    |    | C2.2            |    |    |    |
| C1.3            |    |    |    | C2.3            |    |    |    |
| N1.1            |   |    |   | N2.1            |   |    |   |
| N1.2a           |   |    |   | N2.2a           |   |    |   |
| N1.2b           |   |    |   | N2.2b           |   |    |   |
| N1.2c           |   |  |   | N2.2c           |   |  |   |
|                 |   |   |   | N2.2d           |   |  |   |
| N1.3            |   |  |   | N2.3            |   |  |   |
| IT1.1           |  |  |   | IT2.1           |  |  |   |
| IT1.2           |  |  |  | IT2.2           |   |   |   |
| IT1.3           |   |   |   | IT2.3           |  |  |  |
| W01.1           |  |  |  | W02.1           |  |  |  |
| W01.2           |  |  |  | W02.2           |  |  |  |
| W01.3           |  |  |  | W02.3           |  |  |  |
| LP1.1           |  |  |  | LP2.1           |  |  |  |
| LP1.2           |  |  |   | LP2.2           |  |  |   |
| LP1.3           |  |  |  | LP2.3           |  |  |  |
| PS1.1           |   |  |   | PS2.1           |   |  |   |
| PS1.2           |   |  |   | PS2.2           |   |  |   |
| PS1.3           |   |  |   | PS2.3           |   |  |   |

\* externally-assessed unit

**E**

## Spiritual, Moral, Ethical, Social, Cultural and Citizenship Issues Signposting

Opportunities for the exploration of Spiritual, Moral, Ethical, Social, Cultural and Citizenship Issues within each unit are indicated in the grid below.

|   | Spiritual | Moral | Ethical | Social | Cultural | European Initiative | Environment | Citizenship |
|---|-----------|-------|---------|--------|----------|---------------------|-------------|-------------|
| <b>Unit 1</b>   |           |       |         |        |          |                     |             |             |
| The reasons and need for care services                          | ✓         | ✓     | ✓       | ✓      | ✓        |                     |             |             |
| The types of care services                                      |           |       |         | ✓      | ✓        | ✓                   |             | ✓           |
| Access/barriers to care services                                | ✓         | ✓     | ✓       | ✓      | ✓        |                     | ✓           |             |
| Nature of and skills within care work                           |           | ✓     | ✓       | ✓      | ✓        | ✓                   |             |             |
| Value bases of care work  |           | ✓     |         | ✓      | ✓        |                     |             |             |
|   |           |       |         |        |          |                     |             |             |
| <b>Unit 2</b>   |           |       |         |        |          |                     |             |             |
| Definition of health and well-being                             | ✓         |       |         | ✓      | ✓        |                     |             |             |
| Factors with a positive influence on health and well-being      | ✓         | ✓     | ✓       | ✓      | ✓        |                     |             | ✓           |
| Factors putting health and well-being at risk                   | ✓         | ✓     | ✓       | ✓      | ✓        |                     |             |             |
| Measuring health and well-being                                 |           |       |         | ✓      | ✓        | ✓                   |             |             |
| Improving health and well-being                                 |           |       |         | ✓      | ✓        | ✓                   |             |             |
|   |           |       |         |        |          |                     |             |             |
| <b>Unit 3</b>   |           |       |         |        |          |                     |             |             |
| Human growth and development                                    | ✓         | ✓     | ✓       | ✓      | ✓        |                     |             |             |
| Factors affecting growth and development                        | ✓         | ✓     | ✓       | ✓      | ✓        |                     | ✓           |             |
| Effect of relationships on an individual's personal development | ✓         | ✓     | ✓       | ✓      | ✓        |                     |             |             |
| Factors affecting the development of a person's self-concept    | ✓         | ✓     | ✓       | ✓      | ✓        |                     |             |             |
| Affect of life events on personal development                   | ✓         | ✓     | ✓       | ✓      | ✓        |                     |             |             |