Applied AS/A Level GCE

GCE in Health and Social Care

OCR Advanced Subsidiary GCE in Health and Social Care H103

OCR Advanced Subsidiary GCE in Health and Social Care (Double Award) H303

OCR Advanced GCE in Health and Social Care H503

OCR Advanced GCE in Health and Social Care (Double Award) H703

September 2013

Contents

Vertical black lines indicate a significant change to the previous printed version. .

1 About these Qualifications

This booklet contains OCR's Advanced Subsidiary GCE, Advanced Subsidiary GCE (Double Award), Advanced GCE and Advanced GCE (Double Award) specifications in Health and Social Care for teaching from September 2013.

The specifications build upon the broad educational framework supplied by the Qualification and Subject Criteria (QCA, DCELLS and CCEA, 2002) and employ an investigative and problem-solving approach to the study of the subject. In addition to providing a suitable route for progression for candidates completing GCSE Health and Social Care, the course of study prescribed by these specifications can also reasonably be undertaken by candidates beginning their formal education in the subject at post-16 level. Progression through the Advanced Subsidiary GCE and Advanced GCE, through either a single or double award, may provide a suitable foundation for study of the subject, or related subjects, in further and higher education.

Key Skills are integral to the specifications and *the main* opportunities to provide evidence for the separate Key Skills qualification are indicated.

1.1 The AS GCE

The Advanced Subsidiary (Single and Double Award) GCEs are both a 'stand-alone' qualification and also the first half of the corresponding Advanced (Single and Double Award) GCEs. The AS GCE is assessed at a standard appropriate for candidates who have completed the first year of study (both in terms of teaching time and content) of the corresponding two-year Advanced GCE course, i.e. between GCSE and Advanced GCE.

The AS GCE is made up of **three** mandatory units which form 50% of the corresponding six-unit Advanced GCE.

The AS GCE (Double Award) is made up of **three** mandatory units and **three** optional units which form 50% of the corresponding twelve-unit Advanced GCE (Double Award).

The skills, knowledge and understanding required for the first half of an Advanced GCE course are contained in the 'Advanced Subsidiary' (AS) units. The level of demand of the AS examination is that expected of candidates half-way through a full Advanced GCE course of study.

1.2 The Advanced GCE

The Advanced GCE is made up of **three** mandatory units at AS and **three** further units at A2.

The Advanced GCE (Double Award) is made up of **three** mandatory and **three** optional units at AS and **six** further units at A2.

The skills, knowledge and understanding required for the second half of an advanced GCE course are contained in the 'A2' units. The level of performance expected, therefore, reflects the more demanding Advanced GCE material, including the higher-level concepts and a requirement to draw together knowledge and skills from across the course. The precise pattern across AS and A2 reflects the nature of individual subjects.

The combination of candidates' attainments on the relatively less demanding AS units and relatively more demanding A2 units lead to an award at Advanced GCE standard.

1.3   Qualification Titles and Levels

These qualifications are shown on a certificate as:

- OCR Advanced Subsidiary GCE in Health and Social Care.

- OCR Advanced Subsidiary GCE (Double Award) in Health and Social Care.

- OCR Advanced GCE in Health and Social Care.

- OCR Advanced GCE (Double Award) in Health and Social Care.

All qualifications are Level 3 in the National Qualification Framework (NQF).

1.4   Aims

All specifications in Health and Social Care aim to be applied to the care sector whose contexts include: health, early-years care and education, social care and are to take account of the integration of services. The term 'care sector' includes all the contexts specified.

The aims of these specifications are to encourage candidates to:

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

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

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

- Apply knowledge, understanding and skills

- Prepare for further study and training.

The content at AS will focus on the needs of clients and the techniques and professional services aimed at meeting those needs. Candidates are to be assessed in the following key areas of study:

- Rights, responsibilities and values

- Communication in care settings

- Health and well-being.

The content at A2 will develop AS content through addressing the factors affecting, and issues involved in, service delivery. Candidates are to be assessed in the following key areas of study:

- Service provision and practitioner roles

- Understanding human behaviour and development

- Their ability to draw together aspects of these areas in a variety of contexts.

1.5 Prior Learning/Attainment

Candidates entering this course should have achieved a general educational level equivalent to Level 2 in the National Qualifications Framework, or Levels 7/9 of the National Curriculum. Skills in Numeracy/Mathematics, Literacy/English and Information and Communication Technology will be particularly relevant. However, there is no prior knowledge required for this specification. Prior study of the GCSE in Health and Social Care will be of benefit to candidates, but is not mandatory.

Prior learning, skills and aptitudes particularly relevant include:

GCSE Health and Social Care (Double Award), Foundation and Intermediate GNVQ Health and Social Care, OCR Nationals in Health, Social Care and Early Years.

2 Summary of Content

2.1 AS Units

Unit F910: *Promoting quality care*

- Attitudes and prejudices
- Rights and responsibilities of people who use services and providers
- Facilitation of access to services
- Values of care
- How organisations promote quality care.

Unit F911: *Communication in care settings*

- Types of communication
- Factors that support and inhibit communication
- Communication skills
- Theories relating to communication
- Interaction with the person who uses services(s)/practitioner(s).

Unit F912: *Promoting good health*

- Principles of health and well-being
- Preventative measures and job roles
- Planning a health promotion campaign
- Carry out a health promotion campaign.

Unit F913: *Health and safety in care settings*

- The influence of current legislation on safe practice in care settings
- Safety and security
- Safe moving and handling techniques
- Contribution to infection control.

Unit F914: *Caring for people with additional needs*

- Common causes of additional needs
- Care-management process
- Production of a profile of a person who uses services with additional needs
- Models and approaches
- Barriers to access, support, aids and equipment available.

Unit F915: *Working in early-years care and education*

- Care and education provision for early years in the local area

- Job roles and responsibilities available within early-years care and education

- Values and principles of the early-years sector

- The ways children learn and factors that affect performance

- How to plan and implement activities for children in care and education settings.

Unit F916: *Health as a lifestyle choice*

- Positive effects of exercise

- Nutritional value of food and the dietary function of nutrients

- Exploring dietary health

- Designing an exercise programme

- How diet and exercise affect health.

Unit F917: *Complementary therapies*

- Development of complementary therapies

- Use and provision of complementary therapies

- Meeting physical, emotional and social needs

- Value of complementary therapies.

Unit F918: *Caring for older people*

- Physical effects of ageing on body systems

- Social, emotional and economic aspects of ageing

- Community care and support services for older people who use services

- Practitioners

- Legislation.

2.2   A2 Units

Unit F919: *Care practice and provision*

- Planning and provision of services

- Effects of national policy and legislation on care practice and provision

- How quality assurance is promoted by services

- Conducting a survey relating to quality assurance

- How services and practitioners meet individual needs

- Ways in which practitioners within services work in partnerships.

Unit F920: *Understanding human behaviour and development*

- Factors influencing human development

- Theories of human development

- The application of theories to aid the understanding of human behaviour and development.

Unit F921: *Anatomy and physiology in practice*

- Respiratory system

- Cardio-vascular system

- Digestive system

- Reproductive system

- Renal system

- Musculo-skeletal and neural systems

- Effects of lifestyle choices on body systems and health and well-being.

Unit F922: *Child development*

- Development and monitoring

- Factors that influence development and norms of development

- The role of play in development

- How to plan and make a learning aid/activity for a child (0-8).

Unit F923: *Mental-Health issues*

- The concept of mental health
- Types of mental illness
- Causes of mental illness
- Effects of mental illness
- Preventative and coping strategies
- Support for people with mental-health needs.

Unit F924: *Social trends*

- Social trends and patterns of family life
- Reasons for change in the structure of the family and roles of individuals
- Using data to explore and draw conclusions about the trends and patterns of family life.

Unit F925: *Research methods in health and social care*

- Purposes and methods of research
- Ethical issues, sources of error and bias in research
- Planning, presenting and analysing findings from research
- Evaluating findings from research.

3 Unit Content

3.1 AS Unit F910: *Promoting quality care*

For candidates considering a career in health, social care or early years, it will be important to know how they can contribute to promoting quality care within a setting.

This unit links with Unit F914: *Caring for people with additional needs* and Unit F915: *Working in early-years care and education*. This unit forms the basis upon which Unit F919: *Care practice and provision* is structured. Additionally, this unit has links with Unit F920: *Understanding human behaviour and development,* Unit F923: *Mental health issues* and Unit F924: *Social trends*. Although this unit does not link directly to the NVQs in Providing health, social and protective services, it provides a broad introduction to the qualifications involving Care, Caring for Children and Young People, and Early-Years Education at Levels 2 and 3.

Attitudes and prejudices

Individuals who need health, social care or early-years services can be highly vulnerable because they are dependent on others for their care. This means that practitioner's attitudes and prejudices can affect the care people who use services experience.

Candidates need to know how attitudes and prejudices are learnt, which for testing purposes will be limited to the following agencies:

- primary socialisation – early in life – e.g. the influence of the family;

- secondary socialisation – later in life – e.g. education, media, work, peers.

Candidates need to understand the possible effects of attitudes and prejudices on people who use services, which for testing purposes will be limited to:

- health and well-being;

- self-esteem and sense of empowerment;

- unfair treatment – direct and indirect discrimination.

Rights and responsibilities of people who use services and providers

All members of society have fundamental human rights. You need to appreciate how the law is used to protect and promote certain rights. For the groups of people who use services below, you need to consider their needs and the issues they face in society today and how current legislation seeks to address these needs, which for testing purposes will be limited to:

- children and young people, e.g. Every Child Matters;

- vulnerable adults, e.g. PoVA;

- people with disabilities, e.g. Disability Discrimination Act;

- minority ethnic groups, e.g. Race Relations Act;

- men and women, e.g. Sex Discrimination Act;

- older people, e.g. Equality Bill.

You are only required to know about legislation relevant to the country in which you live.

You need to identify the appropriate piece of legislation that would protect the groups above and

give an outline of the key features of the legislation. You need to know how the legislation protects their rights and aims to address their needs. You need to understand the strengths and weaknesses of named legislation in addressing their needs.

Service providers have to ensure that, when promoting the rights of a person who uses services, they are not affecting the rights of others. You need to appreciate that those who exercise their rights also have responsibility for themselves and for others.

You need to identify the boundaries that apply to people who use services' rights within given health, social care and early-years contexts or situations. You will be tested on your knowledge and understanding of when information should be kept confidential, and when it should be passed on to other practitioners or organisations on a 'need-to-know' basis, including:

- when a person who uses services is at risk of harm;

- when others may be at risk of harm;

- when the person who uses services is at risk of harming others;

- when the person who uses services is intending to or is breaking the law (a serious crime).

You will also be tested, through given scenarios, on when people who use services' wishes can be overruled.

Facilitation of Access to Services

Service providers are required to ensure fair and equal access to their services. As a result, providers work to reduce the barriers which lead to social exclusion.

Candidates need to identify the barriers that can affect a service provider's ability to deliver services for everyone and give a detailed explanation of how the barrier affects the person who uses service's/group's access to services. For testing purposes these will be limited to:

- *physical barriers* that affect people with mobility problems when the existing premises and facilities have been designed on the assumption that all people who use services are able-bodied;

- *psychological barriers* – individuals may be unwilling to visit their GP because they are frightened of the diagnosis they may receive, or the perceived stigma attached to the illness – people with mental health problems may not recognise that they need a particular service;

- *financial barriers* – individuals on low incomes may be discouraged from accessing a service because of the cost, and may be unaware of any benefits they may be entitled to – financial barriers may also arise because of a lack of funding to ensure that the level of provision matches the demand;

- *geographical or location barriers* – people who use services in rural areas may have difficulty in accessing specialist services and there may be insufficient outreach provision or public transport may be limited – access to services may also be affected by the so-called 'postcode lottery' which means that, because of regional differences, the level of services available depends on where candidates live;

- *cultural and language barriers* – some people who use services may experience social exclusion because the service provider has not understood or accounted for the cultural differences that exist – service users for whom English is their second language could find it difficult filling out forms and communicating with practitioners.

Candidates also need to know the ways in which inclusive service providers facilitate access to services, which for testing purposes will be limited to:

- adaptation of existing premises and facilities;

- use of campaigns to raise awareness and change attitudes;

- promotion of self-advocacy;

- identification of additional sources of funding;

- joint planning and funding to ensure an effective integration of services.

Values of Care

The values of care are derived from ideas about human rights. These values underpin all practical caring.

Candidates need to know the values of care which apply to health and social care, which for testing purposes will be limited to:

- promoting equality and diversity of people who use services;

- promoting individual rights and beliefs;

- maintaining confidentiality.

It is important to understand that, although there are some common themes, the values of care which apply to health and social care settings are different from those within early-years. These are:

- making the welfare of the child paramount;

- keeping the children safe and maintaining a healthy environment;

- working in partnership with parents/families;

- making sure that children are offered a range of experiences and activities that supports all aspects of their development;

- valuing diversity;

- equality of opportunity and anti-discriminatory practice;

- maintaining confidentiality;

- working with others;

- reflective practitioners.

Candidates need to explain the ways in which these underlying principles and values are applied by health, social care and early-years practitioners in their day-to-day work.

How organisations promote quality care

Candidates need to know what codes of practice, charters and organisational policies are, and how they promote quality care whilst protecting health, social care and early-years practitioners.

They also need to learn about the components of an equal opportunities policy including:

- *a policy statement* explaining who is covered by the policy and what is meant by goods, facilities and services; stating the aims and outcomes of the policy; the link to the organisation's vision or mission statement and business plan; have reference to the legal requirements; indicate who is responsible for implementation;

- *an implementation plan* which includes commitment from senior management and staff; consultation with people who use services, staff and the wider community; the training of staff to promote ownership and good practice; target setting and timescales; establishing methods for monitoring and measuring progress; communicating the policy to people who use services and staff;

- the ways in which the policy will be *monitored* to include the collection of data, e.g. by gender for applications for services, those refused services, complaints;

- *an evaluation* of the policy to see whether the policy has ensured fair representation of people from all groups in the community; high levels of customer satisfaction; a good reputation of the organisation in the local community;

- after evaluation, *targets* can be set to improve future performance.

Candidates also need to understand the purpose of other policies, which, for testing purposes will be limited to:

- harassment;

- bullying;

- confidentiality.

Candidates also need to identify and explain how codes of practice and organisational policies reflect day-to-day practice, which, for testing purposes will be limited to the Equal Opportunities Code of Practice on:

- staff selection;

- training and professional up-dating;

- staff knowledge and understanding of policies and procedures;

- fostering positive attitudes in staff;

- support systems for people who use services and staff.

3.2   AS Unit F911: *Communication in care settings*

This unit investigates the different types of communication skills used in care settings and their purpose. This will include oral, non-verbal, written, computerised and any special methods used in the care settings. Candidates will also find out how effective communication values individuals and promotes health and well-being.

Candidates will have the opportunity to learn and practise communication skills with people who use services and/or practitioners.

This unit links with the following units: Unit F910: *Promoting quality care*, Unit F914: *Caring for people with additional needs*, Unit F915: *Working in early-years care*, Unit F920: *Understanding human behaviour and development*, Unit F922: *Child development*, and Unit F923: *Mental health issues*.

Candidates will produce a report based on the different communication skills used in **one** health or social care or early years setting. Evidence will include:

- an understanding of the different types of communication used in care settings and the factors that support and inhibit communication, giving examples;

- an explanation of how practitioners use **four** different communication skills in the care setting to value people who use services, giving examples;

- relevant research and analysis of **two** theories that provide guidance about the effects of communication on people who use services and/or practitioners;

- the production of records to show the effectiveness of communication skills in an interaction with an individual person who uses services/practitioner *or* a small group of people who use services/practitioners, evaluating their performance and making recommendations for improvements.

Types of Communication

Candidates need to recognise the different types of communication used in care settings and their purposes, to include:

- oral communication, e.g. to give information, to obtain information, to exchange ideas;

- written communication, e.g. person who uses services history, monitoring people who use services' health, menus, care plans;

- computerised communication, e.g. e-mails, Internet information, networking;

- special methods, e.g. sign language, Makaton, Braille.

Factors that Support and Inhibit Communication

Candidates need to understand how the application of the values of care by practitioners when communicating with people who use services can be supportive. The values of care include:

- promoting equality and diversity;

- maintaining confidentiality;

- promoting individual rights and beliefs.

Candidates need to understand that confidentiality is a key value in health and social care and that they might be faced by confidentiality dilemmas. Candidates need to know what to do if they have been given information that they feel they should share.

Candidates need to be aware of factors that both can support or inhibit communication, these include:

- positioning, e.g. space, height;

- emotional, e.g. fear, happiness, self-esteem, trust, empathy, responsiveness, attentiveness, respect;

- environmental conditions, e.g. space, noise, lighting, ventilation;

- special needs, e.g. using appropriate vocabulary, sign language.

Candidates also need to understand the importance of the content that is being communicated.

Communication Skills

People working in health and social care settings need to communicate with other practitioners, people who use services and their relatives. They may take part in one-to-one and group interactions.

Some of these interactions will be informal and others will be formal. Candidates need to consider different types of interaction, their purposes, the people involved and how to build a professional relationship with people who use services. A range of skills will be used when communicating with others and these influence the effectiveness of the communication, may include:

- tone of voice;

- pace of voice;

- eye contact;

- facial expression;

- clarifying;

- posture;

- paraphrasing;

- empathising.

Candidates need to understand how each of these skills may affect interaction and how they can minimise communication barriers and help value people as individuals. You need to understand how people who work in health and social care apply the appropriate values of care in their roles.

Theories Relating to Communication

Candidates need to understand how theory can be used as a strategy to enhance, and prevent barriers to, communication, to include theories relating to:

- group structures;

- the communication cycle;

- the structure of interactions, e.g. introduction, main content, reflecting and winding down;

- SOLER (in relation to listening skills);

- theories of formation, e.g. Tuckman, Burnard, Thompson, Bales.

Candidates need to include records of their interaction with the person/people who use services(s)/practitioner(s) that show how the interaction was planned and conducted, the aims and objectives for the interaction, and the skills were used.

When planning the interaction candidates need to prepare for several stages, for example:

- introduction;

- main content;

- discussion;

- reflection and winding up.

The purpose of the interaction also needs to be clearly defined, for example:

- giving information;

- obtaining information;

- exchanging ideas and opinions.

Candidates need to evaluate the effectiveness of the interaction from the perspective of the person/people who use services(s)/practitioner(s), their own perspective and the perspective of others, e.g. the teacher and/or their peers. Candidates need to include a witness statement

The evaluation needs to include:

- reflecting – thinking back;

- analysing – considering each part in detail;

- drawing conclusions – making decisions about effectiveness, from their viewpoint and/or from the viewpoint of others, e.g. the person/people who use services(s)/practitioner(s), teacher, peers;

- planning for improvement – could their skills have been improved? Could factors that influenced the interaction have been better managed?

3.3   AS Unit F912: *Promoting good health*

This unit investigates the range of lifestyle choices and societal factors which influence health and well-being. Candidates will investigate the ways in which ill-health can be prevented and the health-promotion methods that are used by health-and-social-care practitioners. Candidates will develop an understanding of the attitudes and prejudices which influence individuals' health and well-being.

This unit has links with Unit F910: *Promoting quality care*, Unit F911: *Communication in care settings*, Unit F916: *Health as a lifestyle choice*, Unit F917: *Complementary therapies*, Unit F919: *Care practice and provision* and Unit F923: *Mental health issues*. Although this unit does not link directly to the NVQs in Providing health, social and protective studies, it provides a broad introduction to the topic.

- Candidates will produce a report of the planning of, and their participation in, a small-scale health-promotion campaign to promote good health. Materials used should be published by an existing agency. The report will include:

- Evidence that the candidate understands the principles of health and well-being, including ill-health,

- Relevant research and analysis of **two** factors that can affect health and well-being, giving an analysis of their effects on individuals

- Applying knowledge and showing understanding of the job roles of key workers who promote health, including information about **two** preventative measures

- Evidence of their own performance when planning, and participating in, a small health-promotion campaign, evaluating their own performance.

Principles of Health and Well-being

Health and wellbeing mean different things to different people. Candidates need to understand a variety of interpretations of the term 'health'.

Candidates need to understand the range of factors which affect physical, intellectual, emotional and social health and wellbeing, including:

- attitudes and prejudices, e.g.
    fear,
    lack of trust of health practitioners;

- lifestyle choices, e.g.
    diet,
    substance abuse,
    exercise,
    recreational activities;

- social factors, e.g.
    family,
    social class,
    culture;

- environmental issues, e.g.
    pollution,
    housing,
    workplace health;

- financial factors, e.g.
  income;

- physical factors, e.g.
  additional needs.

Candidates need to understand that the concept of ill-health differs according to the medical and social models and the effects of ill-health on individuals' quality of life.

Preventative Measures and Job Roles

Candidates need to understand the implications on health and well-being of:

- current health promotion initiatives, e.g. eating disorders, sun safety, binge drinking;

Candidates need to recognise that there are many ways in which ill health can be reduced and that there are a variety of individuals/practitioners whose job role involves health promotion, including:

- health education specialists;

- health visitors;

- community nurses;

- environmental health officers;

- sexual health advisers;

- carers.

For individuals/practitioners, candidates need to understand the job role, skills and qualities, preventative measures used, e.g. education, and the reasons for using these preventative measures. Preventative measures could include:

- education;

- preventative legislation;

- screening/immunization.

Reasons for using preventative measures could include:

- improving health and well-being;

- encouraging the use of preventative measures;

- increasing understanding of environmental causes of ill-health;

- increasing the skills required by individuals to take control of their own health.

Planning a health promotion campaign

When planning a small-scale health-promotion campaign, candidates need to recognise the different methods that can be used to pass on messages to individuals, e.g. leaflets and handouts, poster displays, videos and audio tapes and mass media such as TV, newspapers.

Candidates need to understand the different approaches (models) that can be used when planning and carrying out health-promotion campaigns, to include:

- the preventative model – probably the most common method;

- the empowerment model – seeks to encourage individuals to take control of their own health, and occasionally the environment, as well as the choices they make;

- the educational approach – seeks to inform and educate to promote healthy practices;

- client-directed approach – used to work with individuals to identify their needs prior to organising a campaign which is then aimed to meet those needs specifically;

- the use of fear as an approach – increasing in popularity, particularly when used on television, e.g. using vivid images of the consequences of unhealthy lifestyle choices to instil fear into those who watch.

It is important for candidates to consider the following when planning their health education campaign, including:

- aims and objectives;

- pre-set criteria including feedback mechanisms;

- cost;

- timescales;

- resources;

- approach(es) to be used.

Carry out a health promotion campaign

It is important for candidates to understand the ways used to measure the outcomes of a health promotion campaign, including:

- aims and objectives;

- pre-set criteria;

- pre- and post-questionnaires;

- witness statements/feedback from others.

When evaluating the small-scale health-promotion campaign, candidates need to include an evaluation of:

- their own performance and that of the group, if applicable;

- the effectiveness of the campaign relating to the pre-set criteria.

3.4 AS Unit F913: *Health and safety in care settings*

For candidates considering a career in health, social care or early-years settings, it will be important to know about health and safety practices that need to be followed.

This unit links with Unit F910: *Promoting quality care*, Unit F913: *Health and safety in care settings*, Unit F914: *Caring for people with additional needs*, Unit F915: *Working in early-years care and education*, Unit F918: *Caring for older people*, Unit F920: *Understanding human behaviour and development* and Unit F923: *Mental health issues*.

The Influence of Current Legislation on Safe Practice in Care Settings

In the UK, the Health and Safety Executive (HSE) is the main body responsible for enforcing legislation and providing guidance on health and safety in the workplace. Candidates need to know:

- the names, dates, purpose and key features and principles of legislation intended to safeguard health and safety in care settings and how these influence practice in the workplace, including:
  – Health and Safety At Work Act 1974 and significant amendments;
  – Management of Health and Safety At Work Regulations 1992;
  – Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR);
  – Health and Safety (signs and signals) Regulations 1996 and;
  – the role of the Health and Safety Executive in enforcing these in the workplace;

- health and safety information that needs to be available to employees, including:
  – the Health and Safety Law poster/leaflet; including the details which need to be put on the poster:
    - name of an employee representative, if there is one;
    - name of the manager representative – this could be the employer in small businesses;
    - contact details of the enforcing authority;
  – the requirement for first-aid provision;
  – the location of the accident book and how to use it;
  – a health and safety policy document and its purpose – sets out the employer's general policy in respect of health and safety, and describes the organisation/settings/arrangements for carrying out that policy which should be reviewed as often as is appropriate, e.g. annually.

- the Control of Substances Hazardous to Health 1999 Regulations (COSHH) – need to be able to recognise what these substances are and how they need to be stored.

Candidates need to be aware that the law states that:

- a person who uses services in the workplace who can take charge in an emergency needs to be identified;

- a first-aid box must be available;

- a notice stating where the first-aid box is located, and whom is the approved person who uses services, should be clearly visible;

- a trained first-aider and a first-aid room should be available if the workplace gives rise to special hazards.

Safety and Security

Candidates need to understand the importance of maintaining safety and security in health, care and early-years settings.

There are **five** key stages to risk assessment. These are:

- Stage 1: look for hazards;

- Stage 2: assess who may be harmed;

- Stage 3: consider the risk – whether precautions are adequate;

- Stage 4: document the findings;

- Stage 5: review the assessment and revise it if necessary.

Candidates need to consider in some detail what actually happens at each stage.

Candidates also need to know about:

- carrying out formal risk assessments – the actions associated with each stage, and how to keep a written record of the risk assessment;

- reducing risks in different types of settings (early years, residential homes, hospitals, etc.) – training, early warning systems, health and safety policies, use of warning/safety signs, safety features, Personal Protective Equipment (PPE), and how these benefit people who use services and practitioners;

- a broad overview of 'The Fire Precautions (Workplace)(Amended) Regulations 1997';

- fire safety (smoke and fire alarms, different types of fire-fighting equipment) and how to evacuate buildings;

- security in early-years settings, e.g. preventing unwanted visitors, safe collection of children;

- security in residential homes against intruders, in respect of privacy and unwanted visitors, etc.

Safe Moving and Handling Techniques

An employer has the responsibility to examine and assess all procedures which take place in the working environment and involve risk. All risks must be minimised. Candidates need to know:

- the key features of current regulations and laws relating to moving and handling:
  – Manual Handling Operations Regulations 1992, Revised 1998;
  – Lifting Operations and Lifting Equipment Regulations 1998 (LOLER);

- how to assess risks when moving and handling people, using an appropriate check list;

- how to work with an individual who is to be moved, and how to prepare for moving and handling through discussion with them on how best to manage the procedure, asking their opinions – preparation for moving and handling a person who uses services needs to include the handler's clothing, equipment checks and encouraging independence;

- how to use the equipment for moving and handling – hoists and slide boards.

Candidates may NOT move or handle people who use services unless formally trained to do so and only then if they meet the age and training requirements. Candidates must always work with equipment for moving and handling, and with another practitioner.

Contribution to Infection Control

When working in care settings, it is most important that precautions are taken to prevent the spread of infection, particularly 'cross-infection'. The precautions that can be taken are called 'standard precautions'. Candidates need to understand:

- the importance of wearing protective clothing and knowing its purposes:
  – gloves;
  – plastic aprons;
  – masks;
  – personal hygiene;
  – special precautions;

- what is meant by 'standard precautions';

- how to maintain personal safety when dealing with, and disposing of, clinical waste and instruments.

Candidates need to know the details required when completing an accident report form and how to complete one. They also need to show why the form and the details are necessary.

3.5   AS Unit F914: *Caring for people with additional needs*

This unit explores caring for people who use services who have additional needs due to physical disability, sensory impairment, learning difficulty, or any combination of these. The candidate will investigate the attitudes and values of society, experienced by people with additional needs. They will develop an understanding of the care management approaches used by practitioners when providing specialist care or support to people who have additional needs.

This unit links with the following units: Unit F910: *Promoting quality care*, Unit F912: *Promoting good health*, Unit F913: *Health and safety in care settings*, Unit F918: *Caring for older people*, Unit F919: *Care practice and provision* and Unit F920: *Understanding human behaviour and development*. Although this unit does not link directly to the NVQs in providing health, social and protective services, it provides a broad introduction to the qualifications involving Care, Caring for Children and Young People and Early-Years Care and Education at Levels 2 and 3.

The candidate will produce a guide for practitioners which explores caring for people with additional needs, including a profile of a person who uses services. The evidence will include:

- Understanding of the causes of additional needs and the effects of additional needs on people who use services

- Understanding of the care-management processes

- a profile of a person who uses services who has additional needs and key roles of service providers who support people with additional needs

- Research and analysis of the models or approaches used to support the person who uses services recognising attitudes and values of society towards the person who uses services with additional needs

- understanding of the barriers, experiences, support, aids and adaptations used, evaluating their impact on the person who uses services.

Common Causes of Additional Needs

Candidates need to have an understanding of the main causes of additional needs. These could include:

- hereditary conditions, e.g. gene defects;

- chromosomal abnormalities, e.g. the presence of an extra chromosome leading to Down's Syndrome;

- environmental factors, e.g. pollution;

- accidents;

- disease-related causes;

- birth injury, e.g. oxygen deprivation, physical trauma;

- developmental disorders.

Candidates need to have an understanding of how additional needs can affect body function, and the effects (PIES) they may have on people who use services.

Care-Management Process

Candidates need to understand that care-management is the process of tailoring services to meet individual needs. Candidates need to know:

- the stages involved in assessment for people with additional needs, what is involved at each of the stages and how each stage is documented and implemented;

- the methods which are used to assess, plan, implement, monitor and evaluate/review individual care plans;

- which individuals/practitioners are involved in the care-management cycle for people with additional needs and the key roles of those who provide support;

- the benefits of partnership working;

- the staged approach to assessment and intervention for people with learning difficulties;

- the methods used to plan, implement, monitor and evaluate and review individual learning plans, including target setting for people with learning difficulties.

Candidates also need to be aware of family/informal carer considerations in relation to people who use services.

Candidates are not expected to undertake an assessment of need themselves, but they do need to know how assessments are undertaken and the questions and recording documents used.

Production of a Profile of a Person who uses services with Additional Needs

Candidates need to produce a profile of a person who uses services with additional needs. Their profile will include background information about the additional needs their chosen person who uses services has. Candidates may choose to base their profile on someone they know, someone they have met on a work placement, or a case study. Confidentiality must be maintained at all times, candidates must not use real names and they must gather information in a sensitive manner.

Models and Approaches

Candidates need to understand that the type of support provided may depend on the model or approach used, to include:

- the medical model;

- the social model.

Candidates need to consider the differences between the models and the effects these could have on the type of support that the person who uses services could receive.

Candidates need to analyse the attitudes and values of society towards people who use services and understand how stereotyping, prejudice and discrimination can affect people who use services. This needs to include examples of both negative and positive experiences, as these relate to people who use services.

Barriers to Access. Support, Aids and Equipment available

Candidates need to know about possible environmental and economic barriers, and attitudes and values of society, including:

- how environmental barriers restrict access to health, social care or early-years services and facilities, limiting opportunities to participate fully in the social and economic life of their community, and have an effect on their additional needs;

- how positive and negative attitudes affect the social inclusion of people who use services, including employment; e.g. stereotypes of people who experience impairments result in low expectations of ability, unfair discrimination, limited educational provision and assumptions about medical and care needs;

- how economic barriers limit access to services and facilities including work, leisure and recreation.

Candidates also need to consider the ways in which barriers, e.g. environmental, attitudinal and economic, could be overcome to improve opportunities for people with additional needs and their quality of life.

Environmental barriers include the poor accessibility of services, including steps/stairs, lack of lifts, lack of suitable parking spaces, heavy doors, width of corridors. Other restrictions could also be considered, including lack of adapted toilets, height of light switches, sockets, lack of Braille signs etc.

When considering *economic barriers*, candidates may wish to include the cost of transport to services and facilities and the costs of accessing work and leisure facilities.

Candidates also need to know about the different methods of support that is available and how they can be used to meet the person who uses services' individual needs in the following areas:

- assistance with daily living routines;

- education and training;

- day-care provision;

- assistance with health problems;

- social opportunities;

- assistance with mobility;

- economic.

Candidates also need to know how aids and adaptations can be used to improve the quality of life for people who use services. Many Local Authority day centres have an attached unit from which people who use services can rent or loan specialist aids or equipment. These can include, for example, specialist aids for communication, mobility and daily living routines. Candidates need to know how the aids are used and how they assist people who use services.

Candidates need to understand the positive and possible negative effects that the use of specialist aids and adaptations may have on a person who uses service's quality of life and that of their family.

3.6   AS Unit F915: *Working in early-years care and education*

This unit investigates the range of care and education provision for children in early-years settings (0-8 years). Candidates will investigate job roles available within early-years care and education and will gain an understanding about the values of care that underpin those roles. Candidates will develop an understanding of the ways that children learn and methods that can be used to aid learning and development.

This unit links with Unit F913: *Health and safety in care settings*. Additionally, this unit links with Unit F919: *Care practice and provision*, Unit F920: *Understanding human behaviour and development* and Unit F922: *Child development.* Although this unit does not link directly to the NVQs in Providing health, social and protective services, it provides a broad introduction to the qualifications involving Care, Caring for Children and Young People and Early-Years Care and Education at Levels 2 and 3.

Candidates will produce a guide for early-years care and education provision in the local area and explore the different ways in which children learn. Evidence will include:

- Information about different early-years care and education services that are available in the local area, including the influences of **one** national policy

- A description of job roles and responsibilities of practitioners in early-years services and an exploration of how they apply the values of care in their day-to-day tasks

- Information about the ways children in the care setting learn and develop, recognising factors that affect the children's learning and performance

- A learning plan produced and implemented for an activity to use in the early-years setting and an evaluation of the benefits to the child/children, including recommendations for improvement.

Care and Education Provision for Early Years in the Local Area

Early-years services provide for children from birth to eight years. The term 'educare' is now used to convey the concept that care and education are one when it comes to caring for young children. For example, a childminder will be providing care and, through activities, will be encouraging the development of the child. Similarly, a pre-school will not only be providing learning and developmental activities, but will also be providing for the welfare of the child. It is considered that 'care and education' for early-years children are inseparable. Candidates need to investigate this new perspective of 'educare' and the implications of this for early-years provision.

Candidates need to identify the services that provide care and education for children in their early years and their purposes, including:

- private services,
  - e.g.   childminders,
    pre-schools,
    nurseries;

- statutory provision,
  - e.g.   wraparound care/after-school clubs
    reception classes,
    children centres;

- third sector,
  - e.g.   parent-and-toddler groups;

- informal groups,
  e.g. friends and family,
        babysitters.

For each service, candidates need to know the purpose, for example:

- to protect and safeguard,

- to educate,

- to identify and address needs,

- to encourage development,

- to raise awareness.

Candidates need to understand how national policies influence the provision of care and education for children in early-years settings, e.g. Every Child Matters.

Job Roles and Responsibilities Available Within Early-Years Care and Education

Candidates need to learn about the range of jobs available in care and education sectors, and the main responsibilities and day-to-day tasks of these job roles, including:

- job roles within the private sector for early-years care and education,
  e.g. childminder,
        pre-school leader,
        nursery nurse;

- job roles within the statutory provision for early years,
  e.g. reception class teacher,
        classroom assistant,
        care assistant (children);

- job roles within the voluntary sector, e.g. leader for parent-and-toddler groups;

- job roles within informal groups,
  e.g. activities leader,
        babysitters.

Candidates need to find out about the qualifications and skills that would be needed to work in these job roles. These skills could be practical skills, scientific skills, organisational skills, etc.

Candidates need to find out how the day-to-day tasks carried out by their chosen practitioners could be scheduled.

Values and Principles of the Early-Years Sector

Candidates need to learn how practitioners apply the values of care when looking after children in early-years care and education settings. These include:

- the welfare of the child being paramount, e.g. all early-years workers need to give precedence to the rights and well-being of the children with whom they work;

- keeping children safe and maintaining a healthy environment;

- working in partnership with parents and families;

- children's learning and development, e.g. children need to be offered a range of experiences and activities to support all aspects of development;

- valuing diversity, equal opportunity and anti-discriminatory practice;

- maintaining confidentiality;

- working with others, e.g. other practitioners with prior parental agreement;

- the reflective practitioner, e.g. early-years workers need to use any opportunity to reflect upon their practice and principles and make use of the conclusions drawn.

The Ways Children Learn and Factors that Affect Performance

Candidates also need to have an understanding of the strategies used to aid learning, including:

- visual;

- listening;

- oral;

- experiential.

Candidates need to show an understanding of the ways in which children in early-years care and education settings learn and develop, including:

- learning through play;

- learning from other people,
        books,
        television,
        other children.

Candidates need to understand factors that can affect learning and development, including:

- social factors,
  e.g.   family,
            siblings,
            play,
            education;

- environmental factors,
  e.g.   location,
            learning environments,
            resources;

- economic factors,
  e.g.   income,
            the amount of money available for 'wants'.

- physical factors,
  e.g.   disability,
            health status

How to Plan and Implement Activities for Children in Care and Education Settings

Candidates need to recognise that adults play a major role in helping children to learn and develop, and that there are different ways that children acquire skills and knowledge. Candidates need to plan an activity for a child or for children that will aid learning and development. The plan needs to include:

- aims, objectives to be achieved, outcomes, time plan and the intended impact on the child's development;

- delivery methods, implementation methods to be used;

- the sources of feedback and the criteria to be used to make judgements about its success.

Candidates need to implement the plan and evaluate the activity in terms of response, achievement of objectives, delivery methods, and effectiveness of purpose.

The activity does not have to be for a long period of time [**10-15** minutes is adequate]. The activity can be for **one** or more children, but needs to be developmental, e.g. a card game to teach colours, or making an item to improve co-ordination – the activity should be inexpensive to produce.

3.7 AS Unit F916: *Health as a lifestyle choice*

This unit enables candidates to explore health as a lifestyle choice for the individuals at all life-stages. Candidates will study the nutritional value of food and the dietary requirements of an individual. They will learn about current dietary guidelines. Candidates will also investigate the way that exercise can have a positive effect on a person who uses services during different life-stages. They will explore different types of physical activity and the way they can affect the physical, mental and social health of individuals and the concepts involved in devising an appropriate exercise programme for an individual.

This unit has links with Unit F912: *Promoting good health,* Unit F917: *Complementary therapies*, Unit F921: *Anatomy and physiology in practice,* and Unit F922: *Child development.* Although this unit does not link directly to the NVQs in Providing Health, Social and Protective Services, it provides a broad introduction to the qualifications involving Care, Caring for Children and Young People and Early-Years Care and Education at Levels 2 and 3.

Candidates will produce a report on practitioners which explores healthy-lifestyle choices, devising an exercise programme for **one** individual. The evidence will include:

- understanding of the positive effects of exercise on the physical, mental and social health of individuals;

- understanding of the diet of the individual, making recommendations for improvements based on current dietary guidelines;

- relevant research and analysis when planning and designing an exercise programme for the individual;

- monitoring and evaluation of the likely success and effectiveness of the diet recommendations and exercise programme on the individual.

Positive Effects of Exercise

Candidates need to have a sound understanding of improvements exercise can make to the following:

- physical health, e.g.
    fitness,
    muscular strength,
    flexibility,
    weight control,
    coronary heart disease,
    high blood pressure,
    osteoporosis;

- mental health, e.g.
    sense of well-being,
    self-esteem,
    stress relief;

- social health, e.g.
    friendship network.

Candidates need to explore the cardiovascular, skeletal and muscular systems and the positive effect regular exercise can have in the prevention of illness/diseases associated with these organs and the short- and long-term effects of cardiovascular, muscular strength, muscular endurance and flexibility exercises.

Candidates need to explore concepts such as mental alertness, motivation and interest in life. Candidates also need to know about the need for exercise to be an integral part of life; that short bursts once a year will not bring about lasting benefits. Candidates need to understand how exercise can be integrated into everyday life and the effects of exercise on daily living.

Candidates need to understand the benefits of regular exercise in a range of individual circumstances.

Nutritional Value of Food and the Dietary Function of Nutrients

Candidates need to learn about the dietary functions of the main nutrients in food and the contribution that food and food products make to the diets of individuals.

This will include an understanding of the nature and the dietary function of:

- macro-nutrients:
  proteins   high and low biological value,
  fats   saturated,
                          monosaturated,
                          polyunsaturated;
  carbohydrates   starches and sugars;

- micro-nutrients:
  vitamins   water soluble B and C,
                          fat soluble A, D, E and K;
  minerals   calcium,
                          iron,
                          phosphorus,
                          sodium,
                          potassium.

Candidates also need to gain a broad understanding of the foods that provide the main sources of nutrients in the diet and related diseases caused by deficiency or over consumption; also, the essential roles of water and non-starch polysaccharide (NSP/dietary fibre).

Exploring Dietary Health

Candidates need to learn about the nutritional requirements and dietary factors that determine the diets of individuals of all ages and from diverse backgrounds. Candidates need to be aware that some individuals do not readily understand the concept of the healthy diet and that there may be difficulties with availability and access to a range of foods.

Candidates need to understand how to make modifications to the diets of individuals with specific requirements in order to provide them with an optimum diet.

Candidates also need to understand about individuals who chose to modify their diet, either because of their religious belief or as a lifestyle choice. Such dietary modification may include increased or decreased nutrient intake, controlled nutrient intake, nutrient avoidance, or dietary supplementation.

When considering an individual's dietary needs, consider the following::

- stage of life, e.g.
    infants,
    children,
    adolescents,
    adults (active, sedentary),
    older people,
    pregnant women,
    nursing mothers;

- RNIs (Recommended Nutritional Intakes) related to age,
    gender,
    activity,
    state of health;

- meeting religious beliefs/lifestyle choices, e.g.;
    vegetarianism

- specific diet-related disorders, e.g.
    diabetes mellitus,
    high blood pressure,
    osteoporosis,
    irritable bowel syndrome.

Designing an Exercise Programme

Candidates need to design an exercise programme for **one** individual considering the following:

- assessment of fitness level of the individual before and after the programme,
    e.g.   standardised test such as sit and reach;

- safe environments,
    e.g.   inclement weather,
        condition of pitches,
        condition of equipment;

- correct equipment,
    e.g.   goal keeping gloves,
        shin pads;

- suitable clothing,
    e.g.   no jewellery,
        hair tied back;

- suitability of exercise for intended purpose;

- correct preparation,
    e.g.   warm-up,
        cool-down;

- principles of training,
    e.g.   specificity,
        overload,
        progression;

- appropriate monitoring techniques.

Candidates need to take into account the specific needs of the chosen individual and consider:

- starting level of fitness (as found in completed standardised fitness tests);

- aim of the programme,
  e.g.   weight loss,
          toning;

- time available;

- lifestyle;

- desired outcomes.

Candidates' evaluation needs to include:

- their reflection on the exercise programme,

- dietary modifications.

Your dietary evaluation will focus on the benefits to the health of the individual in both:

- short term: for example, regular bowel movements; weight loss, improved digestion; better skin; better nails/hair; feeling of well-being; improved self esteem; better social life,

- long term: for example, less likely to develop certain cancers/obesity/CHD/diabetes/hypertension/ deficiency diseases; improved immune system; better mobility; reduced dental decay.

You need to compare

- the 'before'

- the 'after'

Test results for the physical effects of exercise, with an explanation of the results.

You need to consider how you would change the exercise programme if it was repeated, e.g.… and what the short and long term effects would be on the individual if the programme was continued:

- short term: for example, lower pulse and blood pressure; weight loss; improved BMI; improved body tone; improved well-being; improved self esteem,

- long term; for example, improved strength, improved stamina/endurance; improved flexibility; more efficient heart and lungs; less likely to develop hypertension/CHD/ diabetes/osteoporosis.

3.8   AS Unit F917: *Complementary therapies*

This unit provides the candidate with an opportunity to explore those aspects of complementary therapies (also know as alternate therapies), that are relevant to present day health and social care practices, and how they differ from orthodox medicine. It also enables them to understand that holistic approach to health and well-being. Candidates will research how people view complementary therapies and evaluate the success of complementary and orthodox medicine in meeting people who use services' needs.

This unit links with the following units: Unit F912: *Promoting good health,* Unit F916: *Health as a lifestyle choice,* Unit F919: *Care practice and provision,* Unit F922: *Child development* and Unit F923: *Mental health issues.* Although this unit does not link directly to the NVQs in providing health, social and protective services it provides a broad introduction to the qualifications involving Care, Caring for Children and Young People and Early-Years Care and Education at levels 2 and 3.

The candidate will produce a report into the use of complementary therapies, **one** of which is used by a person who uses services. Their evidence will include:

- Understanding of the categories of complementary therapies, their development and purpose

- Understanding of why **two** complementary therapies are suitable for the person who uses services, describing the role of the practitioners

- Relevant research and analysis on the value of **one** complementary therapy used by the person who uses services to determine the views of members of the public and healthcare practitioners

- An evaluation of how well the person who uses services has had their needs met by the complementary therapy and orthodox medicine.

Development of Complementary Therapies

There are many complementary therapies that are considered suitable for people who use services with a range of physical and emotional needs. The methods are often divided into categories:

- sensory, e.g. aromatherapy, complementary therapies that work in conjunction with the **five** senses;

- cognitive, e.g. hypnotherapy, complementary therapies that promote mind-body healing by using the power of positive thinking;

- expressive, e.g. art therapy, complementary therapies where people are encouraged to express their thoughts;

- physical, e.g. yoga, complementary therapies to release endorphins (mood elevating hormones) and promote better general health;

- medical systems, e.g. Chinese herbalism, complementary therapies using different, alternative, or non-traditional medicines.

*It should be noted that many different ways of categorising complementary therapies exist and that many will belong to more than **one** category.*

Candidates need to understand the development and purpose of complementary therapies, including:

- where they are used;

- how they work alongside orthodox medicine.

Use and Provision of Complementary Therapies

For the two complementary therapies selected candidates need to have knowledge of:

- how each complementary therapy is used;

- settings in which they are used;

- the suitability of each to the person who uses services;

- the role of the practitioners;

- the cost of treatment.

Meeting Physical, Emotional and Social Needs

Candidates need to know about a range of physical, emotional and social conditions people who use services may have including:

- acute pain;

- chronic conditions,
  e.g.   osteoarthritis,
  muscular dystrophy,
  multiple sclerosis,
  asthma,
  back pain;

- mental health problems,
  e.g.   stress,
  depression,
  anxiety,
  panic attacks;

- social isolation;

- dietary disorders;

- habitual behaviour,
  e.g.   fingernail-biting,
  thumb-sucking,
  phobias;

- addiction,
  e.g.   drugs: nicotine, alcohol.

You need to explore complementary therapies that may be suitable to address these conditions; this requires an understanding of lifestyle, opinions, beliefs, culture and development in order to gauge the relative suitability.

You need to consider how complementary therapies meet individual needs compared to orthodox medicine.

Value of Complementary Therapies

Candidates need to investigate current trends in, and opinions about, the use of complementary therapies in health and social care, including:

- the stereotypical image of the use of complementary therapies;

- current public and medical opinions;

- controversial aspects relating to their use in health and social care settings;

- their use alongside, or instead of, orthodox treatments.

Candidates need to analyse their results and explain similarities or differences in the views of the public and healthcare practitioners. Candidates also need to analyse any difference in views between members of the public, e.g. males and females, different age groups, social classes, etc. and any difference in the views between healthcare practitioners, compared on gender, age or occupation. Candidates need to form conclusions about the person who uses service's and healthcare practitioners' views on the extent that the complementary therapy could work with, or replace, some orthodox treatments.

Candidates also need to compare their results with stereotypes about complementary therapies.

3.9   AS Unit F918: *Caring for older people*

This unit enables the candidate to investigate the effects of ageing and the impact this may have on the physical, cognitive, emotional and social life of people aged 65 plus. The candidate will study the current support services available to older adults, and how care practitioners need to apply values of care within their day-to-day tasks.

This unit has links with: Unit F910: Promoting quality care, Unit F912: Promoting good health, Unit F916: Health as a lifestyle choice, Unit F921: Anatomy and physiology in practice and Unit F923: Mental health issues. Although this unit does not link directly to the NVQs in Providing health, social and protective services, it provides a broad introduction to the topic.

Physical Effects of Ageing on Body Systems

Candidates need to have a broad understanding of the physical effects of ageing on older people. Candidates need to consider illnesses and disorders associated with later life, which for testing purposes will be limited to:

- disorders of the circulatory system,
    - e.g.   heart disease,
        sclerosis;
        stroke;

- sensory impairment,
    - e.g.   cataracts,
        visual/hearing degeneration;

- musculo-skeletal disorders,
    - e.g.   osteoporosis,
        rheumatoid arthritis,
        rheumatism;

- disorders of the nervous system,
    - e.g.   senile dementia/Alzheimer's,
        Parkinson's,
        multiple sclerosis;

- disorders of the respiratory system,
    - e.g.   lung cancer,
        emphysema,
        chronic obstructive
        pulmonary disease (COPD);

- disorders of the digestive system,
    - e.g.   cancer of the bowel,
        ulcerative colitis,
        Crohn's Disease,
        diabetes.

Candidates need to have a general overview of the coping strategies people who use services might use to relieve the effects of illnesses and disorders, including:

- support groups

- complementary therapies

- use of aids and adaptations

Candidates also need to have a broad understanding of how the physical effects of ageing on older people may affect their daily living, e.g. if the musculo-skeletal system is affected: the older person who uses services may find movement difficult and they may become less mobile; this could mean that they are less likely to socialise by going out and meeting friends; the effect this could have is that the older person who uses services becomes more isolated, feels less valued and may become confused as they have little social contact; they may also put on weight through lack of movement, which affects the musculo-skeletal system, causing possible further deterioration in condition.

Social, Emotional and Economic Aspects of Ageing

Candidates need to understand the impact of social, emotional and economic changes associated with ageing on health and well-being, which for testing purposes will be limited to:

- increased isolation, as a result of
  mobility problems,
  decreased income,
  decreased motivation,
  not feeling valued;

- increased dependency on others, as a result of
  illness or disorders,
  lack of confidence;

- inability to cope as a result of
  confusion,
  dementia,
  mental illness;

- increased likelihood of potential dangers
  to self,
  to others;

- communication problems, as a result of
  illness or disorders,
  confusion;

- roles of older people,
  e.g.   family members,
         voluntary workers,
         members of the community;

- lifestyle changes,
  e.g.   work patterns,
         time,
         leisure,

- economic changes,
  e.g.   income,
         benefits,

- changes in health and care needs,
  e.g.   informal support,
         formal support;

- life expectancy and the effects of losing a partner.

Changes in *economic* situation, for instance, can greatly affect an older person who uses services, particularly if they are dependent solely on state support. The amount of money they may have could limit their leisure activities. When working, they may have been able to enjoy attending clubs or going away on holiday, but once retired and with a limited income, activities may have to be curtailed and social isolation could result.

Community Care and Support Services for Older People Who Use Services

Candidates need to have a broad understanding of the types of community-care services, and their purpose, in the local area for older people who use services, which for testing purposes will be limited to:

- health-care services;

- social-care services;

- day-care services;

- domiciliary services;

- private and third sector services.

Service provision includes hospitals, intermediate-care centres, residential care and nursing homes, sheltered accommodation, social day-care centres and clubs for older people.

Practitioners

Candidates need to know about the roles of practitioners who provide care within community-care services and how they apply the values of care within their day-to-day tasks, which for testing purposes will be limited to:

- health-care practitioners,
  e.g. community psychiatric nurse,
        health care assistant,
        occupational therapist,
        speech therapist,
        physiotherapist,
        dietician
        GP;

- social-service practitioners,
  e.g. social worker,
        occupational therapist,
        home care assistant.

Values of care are:

- maintaining confidentiality;

- promoting equality and diversity of people who use services;

- promoting individual rights and beliefs.

When considering values of care, the emphasis needs to be on how practitioners apply these in their day-to-day tasks, e.g. a care assistant discussing personal matters with an older person who uses services should use language that could be understood by the older person who uses services, they might speak in a low voice in order to maintain confidentiality, and should provide the opportunity for choice in order to promote individual rights. Candidates need to show, within a typical day at work, how the practitioner would apply values of care in each main task undertaken.

Legislation

Candidates need to understand the impact of current legislation on the provision of care for older people, and to be familiar with relevant current legislation; evaluate the effectiveness of legislation, which for testing purposes will be limited to:

- NHS and Community Care Act 1990;

- Care Standards Act 2000;

- Carers Recognition and Services Act 1995;

- Mental Health Act 2007;

- Health Act 1999.

3.10 A2 Unit F919: *Care practice and provision*

It is important for all workers in the health, social care and early-years care and education services to understand their role in meeting individual needs and how working in partnership can support their work. Health care practitioners also need to understand the importance of quality assurance in raising the standard of care provided and how national policy and legislation affects service provision locally.

Although this unit does not link directly to the NVQs in Providing Health, Social and Protective Services, it provides a broad introduction to the qualifications involving Care, Caring for Children and Young People and Early-Years Education at Levels 2 and 3.

This unit builds upon the knowledge, skills and understanding which the candidate gained from the mandatory AS units to form the synoptic assessment element for these specifications.

The candidate will carry out an investigation to show how demographic factors influence the organisation and provision of health, social care and early-years services in the local area, illustrating how two different local services meet the needs of one person who uses services. The evidence will include:

- information about how **two** demographic characteristics influence the provision of services in the local area;

- how, from **two** different services, practitioners work in partnership to identify and meet the needs of **one** person who uses services;

- research and analysis of quality assurance methods used by the **two** services for the person who uses services;

- an evaluation of the effects of **one** national policy or **one** piece of legislation on care practice and provision and how this has affected the person who uses services.

Planning and Provision of Services

Care practice and provision is complex and ever-changing. Candidates need to understand the concept of 'needs' at a local and individual level, and how effective planning care practice and provision of services aims to respond to changing needs and priorities.

Services work together to identify and meet local needs. Candidates need to understand how local planning is influenced by:

- local demographic characteristics, statistics and trends;

- national standards, targets and objectives.

Demographic influences could include:

- health needs;

- disability;

- density of age of populations;

- unemployment;

- numbers of single parent families;

- the number of older people in the population.

National/local standards, targets and objectives could include:

- national minimum standards;

- national service frameworks;

- strategic health authority targets;

- local health strategy targets.

Effects of National Policy and Legislation on Care Practice and Provision

Candidates need to identify the possible effects of national policies and legislation on care practice and provision, including possible effects on:

- people who use services,
  e.g.   rights and entitlement,
  access,
  consultation;

- services and/or practitioners working in health, social care or early-years providers,
  e.g.   roles and responsibilities,
  accountability,
  working collaboratively and in partnership with others,
  being more responsive to the needs of people who use services,
  changing existing provision,
  greater accountability,
  working with other services, including joint funding;

- national and local care practice and provision,
  e.g.   improving quality,
  encouraging 'joined up' thinking,
  changing the level and pattern of provision,
  using funding to target national priorities.

How Quality Assurance is Promoted by Services

Candidates need to understand what is meant by *quality assurance* and how services implement quality-assurance procedures, including those which have been introduced by national government. Candidates need to identify and analyse a range of quality-assurance mechanisms used by services, including:

- improving information and consultation with people who use services, e.g. 'Your Guide to the NHS';

- implementing quality-service standards, e.g. National Service Frameworks;

- using performance measures, e.g. 'Star Ratings';

- improving registration and inspection procedures;

- evaluating the quality of services experienced by users, e.g. through surveys such as the Patient's Survey;

- rewarding good practice, e.g. the Charter Mark;

- developing procedures for complaints and providing opportunities for suggestions from people who use services and staff;

- raising the training levels within the sector.

Conducting a Survey Relating to Quality Assurance

To obtain the information required about the quality assurance mechanisms that are in place in the **two** services used by the chosen person who uses services, candidates need to prepare appropriate questions. Candidates need to:

- devise questions that will enable them to find out what systems are in place to implement and monitor quality assurance;

- find out how data from quality assurance responses are used;

- find out how quality assurance information is used to inform future practice.

How Services and Practitioners Meet Individual Needs

Practitioners working in health, social care or early years need to recognise and respond to the needs of individual people who use services. These needs may be physical, intellectual, emotional or social. Candidates need to know about the different approaches used in meeting these needs including:

- preventative and treatment, e.g. health screening, immunisation;

- the holistic approach – treating the whole person who uses services, including mental and social factors rather than just the symptoms of a disease;

- the empowerment approach – to give people who use services the ability to take more control of their own health care and to make informed decisions;

- the behavioural approach – to influence human development by shaping or modifying behaviour through the use of selective reinforcers.

Candidates need to recognise the purpose of individual care assessments and plans in meeting the needs of people who use services.

Ways in which Practitioners within Services Work in Partnership

Health, social care and early-years practitioners are central to the delivery of high quality provision of services. Candidates need to appreciate the changes to practitioner roles in recent years and consider the possible effects this may have on services.

Candidates need to know the ways in which practitioners work in partnership to identify and meet the needs of people who use services, including:

- the initial assessment of needs and the *care-management cycle*;

- contributing to provision of services;

- monitoring, reviewing and evaluating.

Candidates also need to recognise how practitioners working in partnership benefit people who use services by:

- ensuring an integrated and seamless approach to service provision;

- enabling early intervention, and prevention, of likely problems escalating into crises;

- ensuring the coordination of services;

- providing best value for the community and individuals.

Candidates need to understand how a partnership approach is organised and implemented and the possible consequences when things go wrong.

3.11 A2 Unit F920: *Understanding human behaviour and development*

This unit provides an understanding of the influences that can affect growth and development and of the concepts and theories that can be used to explain human behaviour across different life stages.

This unit builds on the knowledge and skills developed in Unit F912: *Promoting good health*, Unit F914: *Caring for people with additional needs*, Unit F915: *Working in early-years care and education*, Unit F916: *Health as a lifestyle choice* and Unit F918: *Caring for older people*. Additionally, this unit has links with Unit F922: *Child development* and Unit F923: *Mental health issues*. Although this unit does not link directly to the NVQs in Providing health, social and protective services, it provides a broad introduction to the qualifications involving Care, Caring for Children and Young People and Early-Years Education at Levels 2 and 3.

Factors Influencing Human Development

Human development is affected by many factors which may be advantageous or detrimental. These factors may be biological or a result of person who uses services' experiences and/or the influences of the environment in which individuals are raised. This is the so-called nature versus nurture debate. Candidates need to have a broad understanding of how both nature and nurture contribute to the development of individuals. For testing purposes, these influencing factors will be limited to:

- genetic influences: e.g. cystic fibrosis, Down's Syndrome, Tourette's Syndrome, haemophilia, Huntington's disease, susceptibility to cancers and heart disease;

- socio-economic influences:
    family,
    education,
    housing,
    culture,
    access to health services,
    nutrition,
    income differences;

- influences of the physical environment:
    water pollution,
    air pollution,
    noise pollution;
    housing conditions/location,
    flooding,
    hygiene;

- psychological influences:
    self concept,
    concept of others,
    fear,
    phobias,
    anxiety.

Theories of Human Development

Some theorists believe that human development proceeds in stages. Others place emphasis on genetic, environmental and social influences on development. Candidates need to outline and evaluate theories that can be used to interpret and explain human development, at each life stage. The theories, for testing purposes, will be limited to:

- psychodynamic perspective:
    Freud,
    Erikson;

- biological perspective:
    Eysenck,
    Cattell;

- humanist perspective:
    Maslow,
    Rogers;

- constructivist perspective:
    Piaget,
    Vygotsky;

- behavioural perspective:
    Pavlov,
    Skinner;

- social learning perspective:
    Tajfel,
    Latane,
    Bandura.

In order to further appreciate the nature vs. nurture debate, candidates need to understand the role of the behavioural and social learning perspectives in the development of language and how theorists such as Chomsky and Lennerberg view language development biologically. Candidates need to appreciate the information that can be supplied from the study of 'feral'/severely deprived children.

Candidates also need to understand the importance of bonding between a child and their primary carer as initially studied by Bowlby and how this may relate to the psychological perspective of Freud and Erikson.

Life stages to be considered must include:

- infancy;

- childhood;

- adolescence;

- adulthood;

- later adulthood.

Candidates need to have an understanding of how major influences and theories can be used in care settings to interpret and understand human behaviour and development. Examples of settings could include:

- pre-schools;

- schools;

- nurseries;

- childminding services;

- children's centres;

- day-care centres;

- support day-care centres;

- residential homes;

- hospices;

- respite care;

- foster care;

- nursing homes;

- children's homes.

Candidates need to have an awareness of how theories of human behaviour and development enable individuals/practitioners to support people who use services.

3.12 A2 Unit F921: *Anatomy and physiology in practice*

This unit enables candidates to develop knowledge and understanding of the gross structure, basic micro-anatomy and functions of the main human body systems. The functions of these systems will be used to explain some of the symptoms of a range of common human diseases and dysfunctions, together with causes, appropriate diagnostic tests, care and treatment.

This unit builds on the knowledge and skills developed in Unit F912: *Promoting good health,* Unit F914: *Caring for people with additional needs,* and Unit F916: *Health as a lifestyle choice.* Although this unit does not link directly to the NVQs in Providing health, social and protective services, it provides a broad introduction to the qualifications involving Care, Caring for Children and Young People and Early-Years Care and Education at Levels 2 and 3.

Respiratory System

Candidates need to learn about the respiratory system, which for testing purposes will be limited to the:

- structure of the respiratory system:
    - larynx,
    - trachea,
    - bronchii,
    - bronchioles,
    - pleural membranes,
    - diaphragm,
    - intercostal muscles,
    - alveoli;

- function of the respiratory system:
    - inspiration/expiration,
    - oxygen and carbon dioxide exchange;

- dysfunctions:
    - asthma,
    - cystic fibrosis;
    - COPD;

- causes:
    - genetic,
    - lifestyle,
    - pollutants (smoking/industrial);

- diagnostic techniques:
    - diagnostic imaging techniques,
    - peak-flow monitoring,
    - spirometry,
    - blood tests,
    - sweat test;

- treatment: general principles of:
    - steroids,
    - inhalers,
    - antibiotics,
    - lifestyle changes,
    - physiotherapy,
    - gene therapy.

One dysfunction needs to be studied for testing purposes.

Cardio-vascular System

Candidates need to learn about the cardio-vascular system, which for testing purposes will be limited to:

- the structure of the cardio-vascular system:
    heart,
    arteries, veins and capillaries,
    general functions of blood,
    blood cell types and functions;

- the function of the cardio-vascular system:
    cardiac cycle and its control;

- dysfunction:
    hypertension,
    arrhythmia,
    coronary artery disease,
    angina/heart attacks,
    heart murmurs,
    stroke;

- causes of dysfunction:
    diet,
    alcohol,
    smoking,
    genetic-disposition,
    lifestyle;

- diagnostic techniques: general principles and value of:
    diagnostic imaging techniques, e.g. angiograms, cardiac ultrasound,
    blood pressure monitoring,
    electrocardiogram (ECG) traces;

- treatment: general principles and value of:
    heart surgery,
    medication,
    angioplasty,
    heart pacemakers,
    heart transplant surgery and prevention of rejection,
    lifestyle changes.

One dysfunction needs to be studied for testing purposes.

Digestive System

Candidates need to learn about the digestive system, which for testing purposes will be limited to:

- the gross structure of organs and glands of the alimentary canal (gut); together with their digestive functions;
  - oral cavity,
  - oesophagus,
  - stomach,
  - small intestine,
  - liver,
  - gall bladder,
  - pancreas,
  - large intestine,
  - rectum;

- the basic function of the digestive system – the process of digestion (including the main digestive enzymes) and absorption of food including the structure and function of gut villi;

- dysfunctions: general understanding of:
  - irritable bowel syndrome,
  - gastric ulcers,
  - gall stones,
  - celiac disease,
  - diabetes;

- causes of dysfunction:
  - diet,
  - infection *(helicobacter pylori)*
  - psychological causes,
  - lifestyle,
  - genetic;

- effects:
  - weight loss,
  - malabsorption,
  - pain,
  - deficiency diseases,
  - hypoglycemia;

- diagnostic techniques: general principles and value of:
  - diagnostic imaging techniques,
  - endoscopy,
  - tissue biopsies,
  - blood tests;

- treatment – general principles and value of:
  - medication,
  - lifestyle/dietary changes,
  - general surgery,
  - administration of insulin.

One dysfunction needs to be studied for testing purposes.

Reproductive System

Candidates need to learn about the reproductive system, which for testing purposes will be limited to:

- the gross structure of both the female and male reproductive systems:
    ovaries,
    oviduct,
    uterus,
    cervix,
    vagina,
    testes,
    epididymis,
    prostate gland,
    seminal vesicle,
    vas deferens,
    urethra,
    penis;

    the basic function of the reproductive system:
    menstrual cycle (role of hormones),
    fertilisation,
    pregnancy,
    birth;

- the possible causes of:
    infertility in both genders;

- diagnostic techniques: general principles and value of:
    blood tests,
    sperm analysis,
    ultrasound,
    hystero-salpingogram,
    laparoscopy;

- treatment: general principles and value of:
    fertility treatments,
    IVF,
    sperm donation,
    lifestyle changes.

One dysfunction for each gender needs to be studied for testing purposes.

Renal System

Candidates need to learn about the renal system, which for testing purposes will be limited to:

- the gross structure of the renal system:
    kidneys,
    calyx,
    pelvis,
    ureters,
    bladder,
    urethra;

- the structure and function of a kidney tubule:
    glomerulus,
    Bowman's capsule,
    proximal tubule,
    distal tubule,
    loop of Henle,
    collecting duct,
    ultrafiltration,
    reabsorption;

- the function of the renal system:
    urine production,
    osmoregulation;

- dysfunction:
    renal failure,
    renal infection,
    kidney stones;

- causes:
    diabetes,
    infection,
    raised blood pressure,
    lifestyle,
    auto-immune disease;

- diagnostic techniques:
    diagnostic imaging techniques,
    blood tests,
    urine dipsticks/urine analysis,
    urethroscopy;

- treatment:
    kidney transplant,
    dialysis,
    medication.

One dysfunction needs to be studied for testing purposes.

Musculo-Skeletal and Neural Systems

Candidates need to learn about the musculo-skeletal and neural systems, which for testing purposes will be limited to:

- the structure of the musculo-skeletal and neural systems:
    joints: synovial membrane,
                            synovial fluid,
                            cartilage,
                            muscle,
                            tendon,
                            ligament;
    types of joint: ball and socket,
                            hinge,
                            pivot,
                            sliding/gliding,
                            fixed;

- neural system:
  - brain,
  - spinal cord,
  - sensory nerve,
  - motor nerve,
  - neuron,
  - myelin sheath;
- brain:
  - cerebral hemispheres,
  - cerebellum,
  - hypothalamus/pituitary gland,
  - medulla,
  - corpus callosum;

- the functions of the musculo-skeletal and neural systems:
  - support,
  - movement,
  - protection,
  - co-ordination,
  - balance,
  - memory,
  - cognitive thought,
  - emotions;

- dysfunction:
  - arthritis,
  - osteoporosis,
  - Parkinson's disease,
  - multiple sclerosis,
  - stroke;

- causes:
  - genetic,
  - lifestyle,
  - infection,
  - auto-immune;

- diagnostic techniques:
  - diagnostic imaging techniques,
  - evoked visual response,
  - blood tests,
  - spinal fluid analysis;

- treatment:
  - common medications,
  - joint replacement,
  - physiotherapy,
  - future possibilities using stem cells
  - lifestyle changes.

One dysfunction needs to be studied for testing purposes.

Effects of lifestyle choices on body systems and health and well-being

You need to recognize that a number of lifestyle choices and environmental conditions will affect the body systems either positively and/or negatively. For testing purposes these will be limited to:

- diet;

- smoking;

- alcohol;

- exercise;

- air pollution.

3.13 A2 Unit F922: *Child development*

This unit enables the candidate to investigate the development of children from birth to **eight** years and to consider the influences that can affect their development. Applying the theory will help candidates with their understanding of child development.

The knowledge candidates' gain during their investigation in this unit will help those considering a career as a teacher, nursery nurse, health visitor or paediatric nurse.

This unit has links, with and expands upon knowledge and skills developed in, Unit F911: *Communication in care settings* and Unit F915: *Working in early-years care and education*. Additionally, this unit has links with Unit F919: *Care practice and provision*, Unit F920: *Understanding human behaviour and development* and Unit F921: *Anatomy and physiology in practice*. Although this unit does not link directly to the NVQs in providing health, social and protective services it provides a broad introduction to the qualifications involving Care, Caring for Children and Young People and Early-Years Care and Education at Levels 2 and 3.

Candidates will produce evidence based on the study of a child up to the age of **eight** years. The evidence will include:

- a description of **two** patterns in each area of development of children, described from birth to **eight** years;

- an explanation of the factors that have influenced the child studied and how they have affected his/her development, comparing their development with the norms;

- research relating to **roles** of play and how they can be reflected in the development of the child studied;

- records of the planning and making of a learning aid for the child studied to use and an evaluation of the effectiveness of the aid and the benefits to the child studied.

Development and Monitoring

Candidates need to demonstrate a broad understanding of the patterns of development of children from birth to **eight** years in the following areas::

- physical growth and development:
  height/weight,
  teeth,
  fine motor skills,
  gross motor skills;

- intellectual development:
  cognitive,
  writing,
  reading,
  drawing;

- language development,
  verbal,
  non-verbal;

- social and emotional development:
  bonding,
  security,
  friendships,
  self concept.

Candidates also need to demonstrate their understanding of the monitoring of the development of children including:

- developmental screening:
  newborn,
  8 weeks,
  8 months,
  18 – 24 months,
  4 years;

- growth monitoring:
  height and weight,
  head circumference;

- assessments:
  early years assessments,
  single level tests, teacher assessments, Assessing Pupil Progress (APP)
  Social Services e.g. child assessment.

Factors that Influence Development and Norms of Development

Candidates need to understand the major influences that can affect the development of children, including:

- the family,
  e.g. family structure[1],
        roles and responsibilities of parents/carers[2],
        discipline;

- environmental factors[3],
  e.g. location,
        housing,
        pollution;

- social and economic factors,
  e.g. social class,
        income,
        gender,
        culture;

- psychological factors,
  e.g. security,
        bonding,
        sibling rivalry,
        fears,
        nightmares,
        regression;

- behavioural problems,
  e.g. aggression,
        attention seeking,
        temper tantrums,
        lying;

- education,
  e.g.:   school,
           pre-school,
           home schooling.

[1] nuclear, extended, lone-parent and reconstituted.
[2] food, shelter, warmth, love, support, security and opportunities for learning.
[3] including the nature/nurture issue.

Candidates need to know how these major factors affect the development of children. Candidates also need to show that they have an understanding of the norms of development and compare these to the development of the child studied.

The Role of Play in Development

Candidates need to recognise the role of play in the development of children, including:

- how play influences physical development;

- how play influences children's cognitive development including theories of:
  Piaget (who saw the child as an 'active learner'),
  Vygotsky (who challenged Piaget's ideas),
  Bruner (who further developed Vygotsky's ideas into the concept of the spiral curriculum);

- benefits of play:
  preventing boredom,
  reducing stress,
  diverting aggression,
  creating happiness,
  raising confidence/self-esteem,
  helping children to find out about the world,
  encouraging developmental skills;

- how play can be used as a therapeutic process;

- types of play including:
  Piaget's typology of play,
  (**three** main types: practice play,
                            symbolic play
                            games with rules),
  Hughes' typology of play,
  (**15** types of play in childhood);

- categories of play:
  physical,
  creative,
  imaginative,
  exploratory,
  manipulative,
  social;

- stages of play:
  solitary,
  parallel,
  looking-on,
  joining-in,
  co-operative.

How to Plan and Make a Learning Aid/Activity for a Child (0-8)

Candidates need to plan and make a learning aid/activity, which encourages developmental skills, for a child aged between 0-8 years. Candidates need to include:

- the aims, objectives and outcomes to be achieved by the child using the aid;

- consideration of the impact on development;

- the method of making the aid/activity and resources used;

- consideration of safety aspects when making the aid/activity;

- consideration of the potential *sources* of feedback in order to select the best method to evaluate the aid/activity fully – this could include:
     own observations,
     parent/teacher reflections,
     assessor records,
     questionnaire,
     interview;

- evaluation of the aid/activity in terms of:
     the child's response,
     achievement of outcomes,
     effectiveness of purpose.

3.14 A2 Unit F923: *Mental-health issues*

This unit explores the concepts, types, causes and images of mental health, and the influence the media has on society's perception and treatment of individuals with mental-health needs. This unit also examines how people with mental-health needs are supported by practitioners. The role of legislation in relation to people with mental-health needs is also explored.

The knowledge candidates' gain during their investigation in this unit will help those candidates who are considering a career as a psychiatric nurse, clinical psychologist or manager. It will also extend their awareness of changing attitudes towards mental illness, and its care and treatment.

This unit builds on the knowledge and skills developed in Unit F912: *Promoting good health*, Unit F914: *Caring for people with additional needs*, and Unit F916: *Health as a lifestyle choice*. Additionally, this unit has links with Unit F920: *Understanding human behaviour and development*, and Unit F921: *Anatomy and physiology in practice*. Although this unit does not link directly to the NVQs in Providing health, social and protective services, it provides a broad introduction to the qualifications involving Care, Caring for Children and Young People and Early-Years Care and Education at Levels 2 and 3.

Candidates will investigate mental-health needs and issues and include a profile of **one** person who uses services. Evidence will include:

- understanding of the concepts/definitions, **three** types and possible causes of mental-health illnesses and associated mental-health needs;

- an explanation of **three** effects of the mental-health illness on a person who uses services, including day-to-day life;

- research on preventative and coping strategies and **two** services that could provide support for a person who uses services, including research on **one** piece of appropriate current relevant legislation;

- an evaluation of the concepts and definitions of mental health, including the images and perceptions in the media (using **two** examples) of people with mental-health needs and **one** possible negative effect and **one** possible positive effect of such portrayal.

The Concept of Mental Health

The perceptions of people with mental-health needs are often detrimental to the development of society, as well as to the development and treatment of the individuals themselves. It is vital for health and social care practitioners to have an understanding of how people develop attitudes and views towards people who use services, alongside the practical use of the concept of mental health by practitioners. Candidates need to examine:

- the different concepts of mental health, including use and misuse;

- how and why these may change over time;

- definitions of mental health/disorder;

- methods of diagnosing/measuring mental-health needs;

- present-day images of mental health, and how the media influences attitudes to mental health;

- the reasons for, purposes of, and effects of appropriate current legislation that affects the care of individuals with mental-health needs – the **two** key pieces of legislation being:
  - the NHS and Community Care Act (1990)
    this has brought about far-reaching changes in the approaches used by both health practitioners and family carers

- the Mental Health Act (2007)
  - this sets out how mental illness is defined, and how treatment is made available, along with the processes involved in the use of compulsory powers.

Types of Mental Illness

Candidates need to recognise, and have an overview of, the following range of disorders, and the people each affects and how, including:

- Alzheimer's;

- depressive illnesses;

- generalised anxiety disorder;

- person who uses services/perception disorders, e.g. schizophrenia;

- eating disorders;

- obsessive compulsive disorder(s);

- phobias.

Candidates need to understand the symptoms and resultant needs of each mental illness.

Causes of Mental Illness

Candidates need to have an overview of the following possible causes of mental illnesses:

- physical influences,
  e.g.   the impact of giving birth (postnatal depression);

- societal influences,
  e.g.   drug-related disorders,
  unemployment,
  social deprivation;

- genetic influences,
  e.g.   personality/perception disorders;

- socio-environmental influences,
  e.g.   the impact on the family of the pressure of caring for a child with challenging behaviour in a high-rise flat.

It is important for candidates to realise that any **one** disorder could have a multitude of related causes, and attempting to isolate these causes is a difficult process. Whilst some may have underlying physical causes, the overall picture is often unclear, e.g. there are a variety of possible neurological explanations of schizophrenia. Sensitivity needs to be shown when discussing possible causes of mental illness.

Effects of Mental Illness

Poor mental health has both short- and long-term effects on the individuals themselves, their families/friends, society as a whole and on the role of mental-health practitioners. Candidates need to understand that mental illness may have effects on:

- physical and psychological responses;

- social and emotional health of the individual and others;

- ability to cope with daily life, for example, coping with:
  stigma,
  discrimination,
  harassment;

- ability to relate to others, to make and maintain relationships;

- labelling of the individual's self-concept;

- the cost to society of mental illness.

Changes in social habits in recent years have meant that more people with drug-related disorders are now admitted as acute patients, whereas with developments in medication, people with schizophrenia can cope quite well in the community. A person who uses services with a mental illness may affect members of their immediate family, who begin to show physical and psychological responses to the stress of coping with the person who uses services themselves. In addition, individuals in society may use people who use services as scapegoats.

Preventative and Coping Strategies

When a person who uses services is being cared for in the community, they may be faced with difficulties related to change at work or home, financial insecurity, or stresses in a caring relationship. A range of preventative and coping strategies can be used to help people cope in difficult times. In other cases, the use of these techniques may prevent a relatively minor disorder from turning into a more serious illness. Medication is used in many cases of mental illness, from mild to severe forms.

Candidates need to recognise a range of techniques for coping with the problems associated with mental ill-health, including:

- access to professional help and informal support (third sector), both for the individual and informal carers;

- positive coping mechanisms,
  e.g.   action planning,
         stress management techniques,
         biofeedback;

- monitoring goals and progression;

- cognitive techniques,
  e.g.   cognitive reappraisal,
         theorist approaches, e.g. Freud, Beck, Ellis, Rogers;

- behaviourist techniques;

- medication;

- counselling and psychotherapy;

- electro-convulsive therapy;

- exercise;

- complementary therapies.

Support for People with Mental-Health Needs

Practitioners/individuals who work with people with mental-health needs are based in a wide variety of settings, and the skills and qualities required will differ accordingly. A community psychiatric nurse needs different skills and knowledge from a psychiatric nurse working in an acute mental ward.

Candidates need to know about the provision of care and support people with mental-health needs, including:

- job roles of those providing care and support and the skills involved,
  - e.g. community psychiatric nurse,
    - GP,
    - support worker,
    - advocates,
    - counsellors,
    - psychiatrists,
    - art/drama/music therapists,
    - occupational therapists,
    - social workers;

- charities supporting people with mental-health needs;

- the empowerment of people who use services,
  - e.g. user groups/forums,
    - systems of redress/complaints systems;

- the implications and use of both voluntary and involuntary admissions to institutions;

- assessment of the services which are most appropriate for people who use services;

- appropriate current legislation.

Candidates also need to understand, where applicable, the need for consideration of the health and safety of people in contact with people with mental-health needs vs. the processes involved in withdrawing people's civil liberties. Candidates need to be aware of the possible pressures on individuals/practitioners when making decisions about people who use services, particularly when involved in the exercise of compulsory powers, and the moral and ethical implications of these decisions.

3.15 A2 Unit F924: *Social trends*

This unit develops skills in analysing demographic data to understand social trends that will affect the family and individuals. The family is seen as the most important unit of social organisation, responsible for the health and social welfare of individuals. Evidence suggests that the family is changing, and British society is now characterised by family diversity. This unit focuses upon analysing secondary sources of data to explore the social trends of the changing family structure, including the increase in the rates of divorce, remarriage and cohabitation. It also examines the provision of health and social care services available to support families and individuals.

This unit builds on the knowledge and skills developed in Unit F910: *Promoting quality care,* Unit F916: *Health as a lifestyle choice* and Unit F918: *Caring for older people.* Additionally, this unit has links with Unit F920: *Understanding human behaviour and development* and Unit F922: *Child development.* Although this unit does not link directly to the NVQs in Providing health, social and protective services, it provides a broad introduction to the qualifications involving Care, Caring for Children and Young People and Early-Years Care and Education at Levels 2 and 3.

Social Trends and Patterns of Family Life

Candidates need to analyse data to examine the changes in the structure of families and households, which, for testing purposes, will be limited to examining trends over the last **50** years in:

- the nuclear family;

- the number of children;

- extended families;

- reconstituted families;

- one-parent families;

- dual worker families;

- childless couples;

- same sex couples;

- single person who uses services households;

- homelessness;

- unemployment;

- migration and immigration.

Candidates need to link these social trends to demographic changes in population and age structure, and need to give explanations for social trends by considering economic and societal changes.

The changes in the family have not only been structural, but there have also been changes in the relationships of family members. Candidates need to interpret data on patterns of family life, which, for testing purposes, will be limited to examining trends over the last **50** years in:

- births outside of marriage;

- cohabitation;

- conjugal roles within the family.

Candidates need to recognise how these patterns of behaviour contribute to the changing structure of the family and need to be aware that a change in **one** pattern of family life can have an impact on another.

Candidates also need to realise that there is a range of ethical issues when studying the family – these are often sensitive areas as they concern topics such as children, culture, family structure and lifestyle. Confidentiality must be an important aspect to be taken into account.

Reasons for Change in the Structure of the Family and Roles of Individuals

Candidates need to explain the reasons for, and draw conclusions from, the changes in the structure of the family, and roles of family members over the last **50** years, which, for testing purposes, will be limited to:

- divorce;

- remarriage;

- contraception;

- abortion;

- cultural and racial diversity;

- increasing population of older people;

- life expectancy;

- decreasing birth rates;

- smaller workforce;

- migration and immigration;

- economic factors;

- changing role of women;

- changing role of men;

- changing concept of childhood;

- changes in educational provision;

- educational attainment.

Candidates also need to interpret data and understand the demographic and social trends in relation to these factors.

Changes to Service Provision Available to the Family and Individuals

As the structure of the family changes, the provision of services will vary to meet the needs of the family and its members. Candidates need to recognise the appropriate statutory, private and third sector services that are available to support the family, how service provision is changing, and understand the main roles and responsibilities of health and social care individuals/practitioners who work with the family, which, for testing purposes, will be limited to:

- services to reduce family breakdown;

- assistance during family breakdown;

- child protection services;

- protection services for adults;

- assistance with care for family members;

- financial support for children and families.

Using Data to Explore and Draw Conclusions about the Trends and Patterns of Family Life

Candidates need to interpret and understand secondary sources of information to examine demographic and social trends in the family and individuals. Candidates also need to evaluate the data and explain problems associated with studying the family and individuals, which, for testing purposes, will be limited to:

- quantitative data;

- qualitative data;

- data sampling methods,
  e.g.   random,
          stratified random,
          quota;

- methods of collecting primary data,
  e.g.   experiments,
          questionnaires,
          structured interviews,
          in-depth interviews,
          observation (overt/covert),
          participant/non-participant observation;

- suitability of methods used for collecting the data;

- reliability, validity and bias of primary and secondary data;

- problems with methods used for collecting the data;

- ways of overcoming data-collection problems;

- ethical issues involved in collecting data and researching families and individuals.

Candidates need to describe trends accurately, understand projections and interpret data from tables, line graphs, pie charts, etc. and need to understand percentages, scales and conventions used for numbers such as thousands and millions.

Candidates need to understand the strengths and weaknesses of all the main data-collection methods, as well as their suitability for different purposes.

3.16 A2 Unit F925: *Research methods in health and social care*

In this unit, candidates will select a topic that is relevant to a health or social care or early-years setting and design and carry out a small-scale research project based on their own research question or hypothesis. Candidates will present their findings in the form of a report.

This unit will support research work for all A2 level units. It will allow candidates to select a topic which is of interest to them, although it must be related to an appropriate health or social care or early-years context. In particular, this unit links with the knowledge and skills developed in Unit F913: *Health and safety in care settings* and Unit F915: *Working in early-years care and education.* Additionally, this unit has links with Unit F919: *Care practice and provision,* Unit F920: *Understanding human behaviour and development,* Unit F923: *Mental-health issues* and Unit F924: *Social trends.* Although this unit does not link directly to the NVQs in Providing health, social and protective services, it provides a broad introduction to the topic.

Candidates will produce a research report that would be relevant to a health or social care or early-years setting that they have designed and carried out. The evidence will include:

- Knowledge of the purposes of research and **three** different methods of research available and an explanation of the rationale for the chosen research area

- Understanding of the ethical issues and sources of error and bias to be taken into consideration when planning and carrying out the research project and justification of their choice of research methods

- Research into the chosen area of study, using different sources of information; presentation and analysis of their findings in an appropriate format

- An evaluation of the success of the research project using the predetermined aims and objectives and applying the issues of validity, reliability and representation with their recommendations for improvements and continuation of the research.

Purposes and Methods of Research

Research is the investigation of a topic for a specific purpose. Research can be drawn from a number of disciplines, including medical, health, sociological, psychological, special and early-years care and education. The purpose of such research could include:

- reviewing and monitoring changes;

- exploring specific needs of local populations;

- exploring social-science hypotheses;

- extending and improving practice and collective knowledge.

Candidates need to be aware of the different methods that can be used to collect information and data. These include:

- quantitative and qualitative methods and their uses;

- primary research methods,
  e.g.   interviews,
           questionnaires,
           observation,
           case studies;

- secondary research methods,
  - e.g. literature searches,
      media analysis,
      case studies,
      statistical analysis.

Candidates need to recognise that previous research could have been conducted in the area of study chosen and need to consider relevant theories put forward by such research.

Candidates need to analyse and summarise their findings from the research.

Ethical Issues, Sources of Error and Bias in Research

Candidates need to understand the importance of ethical considerations when carrying out research, including:

- considering the participants rights;

- the importance of confidentiality;

- issues relating to anonymity;

- issues relating to the nature and type of research.

Candidates need to look at what has to be considered in relation to the participants involved in their research project. Participants include:

- people being interviewed;

- people who complete questionnaires;

- people who are observed, either directly or indirectly.

Candidates need to examine the effects of ignoring the importance of ethics and to decide what is ethical and what is not. Candidates need to be aware of the right to confidentiality of participants, e.g. individuals, organisations and any people who have assisted in the research through a work experience placement or place of employment (internal research). Candidates need to acknowledge the rights of participants, to include:

- guaranteed privacy;

- observation of their right to withdraw;

- anonymity;

- confidentiality;

- respect at all times;

- trust that their contribution will be portrayed fairly and accurately.

Candidates also need to understand the issues relating to covert observation, the building up of trust, and ensuring true representation of participants' views.

Candidates need to be aware of the issues of objectivity and subjectivity and their potential impact on a research project. Prior to producing the research project, candidates need to identify possible sources of error and/or bias within the context of the research project they have proposed and also feed this information into the analysis and evaluation aspect of their report.

Candidates need to plan, present and analyse their findings in a manner which is suitable for a research project. The process needs to include:

- choosing the subject area,
  e.g.   what interests them, their access to sources of information, and writing a rationale
           for their choice;

- setting out the hypothesis, issue or research question;

- writing the aims and objectives for the research;

- selecting appropriate research methods,
  e.g.   interviews,
           questionnaires;

- identifying ethical considerations;

- presentation of results

- analysis of results

- evaluation of the design and conduct of the research

- recommendations for future research

- record keeping,
  e.g.   referencing their sources.

The time management and planning process must include plenty of time for candidates to obtain prior permission in order to carry out their research project: If participants are young (early years), parental/guardian permission is required. If the research is to be carried out in a school or similarly large establishment, the head teacher or person who uses services in charge needs to give their written consent.

You need to present your collected data in an appropriate format. This could include:

- tables;

- bar charts;

- line graphs;

- pie charts;

- pictographs;

- sociograms;

- Venn diagrams.

The research candidates undertake needs to support the research issue, question or hypothesis which they have used as *the title for their research project*. Candidates should use a range of research methods and data sources sufficient to provide depth and breadth to their research project. Their presentation of the data needs to be relevant and any diagrams need to be supported by a brief description of what is shown. They need to *use the data collated* to analyse their findings.

Candidates may wish to present their findings as part of an oral presentation.   Witness statements must be used if oral presentations are made.

Evaluation of Findings from Research

Candidates need to evaluate their research project, to include plans, actions, and the written (and oral, if applicable) presentation of their work. Candidates need to identify the strengths and weaknesses, the successes and failures of what they have achieved. Candidates need to discuss the following issues:

- reliability;

- validity;

- representativeness.

Candidates may wish to approach their evaluation by asking themselves questions, for example:

- Are my aims and objectives clear?

- Are they fully met?

- How successful was my primary research?

- Is my work set out in a logical order?

- How well have I managed my time?

Candidates need to make valid recommendations for improving the research project and need to make suggestions for continuation of the research project which address the issues raised by the evaluation of their findings.

4 Schemes of Assessment

4.1 AS GCE Scheme of Assessment

AS GCE in Health and Social Care (H103)	
AS Unit F910: Promoting quality care	
33% of the total AS GCE 1hr 30 mins written paper 100 marks	This paper has **six** questions This unit is externally assessed.
AS Unit F911: Communication in care settings	
33% of the total AS GCE Coursework 50 marks	This unit is assessed through portfolio work This unit is internally assessed **Assessment Criteria**: Please refer to Appendix B at the back of this specification.
AS Unit F912: Promoting good health	
33% of the total AS GCE Coursework 50 marks	This unit is assessed through portfolio work This unit is internally assessed **Assessment Criteria**: Please refer to Appendix B at the back of this specification.

4.2 AS GCE (Double Award) Scheme of Assessment

AS GCE (Double Award) in Health and Social Care (H303)	
AS Units F910 – F912 as above, each being worth 16.67% of the AS GCE (Double Award). Candidates choose three of the following optional units, but must choose either Unit F913 or Unit F918	
AS Unit F913: Health and safety in care settings	
16.67% of the total AS GCE (Double Award) 1hr 30 mins written paper 100 marks	This paper has six questions This unit is an optional part of the double award only and is externally assessed.
AS Unit F914: Caring for people with additional needs	
16.67% of the total AS GCE (Double Award) Coursework 50 marks	This unit is assessed through portfolio work This unit is an optional part of the double award only and is internally assessed **Assessment Criteria**: Please refer to Appendix B at the back of this specification.

AS Unit F915: Working in early-years care and education	
16.67% of the total AS GCE (Double Award) Coursework 50 marks	This unit is assessed through portfolio work

This unit is an optional part of the double award only and is internally assessed

Assessment Criteria: Please refer to Appendix B at the back of this specification. |

AS Unit F916: Health as a lifestyle choice	
16.67% of the total AS GCE (Double Award) Coursework 50 marks	This unit is assessed through portfolio work

This unit is an optional part of the double award only and is internally assessed

Assessment Criteria: Please refer to Appendix B at the back of this specification. |

AS Unit F917: Complementary therapies	
16.67% of the total AS GCE (Double Award) Coursework 50 marks	This unit is assessed through portfolio work

This unit is an optional part of the double award only and is internally assessed

Assessment Criteria: Please refer to Appendix B at the back of this specification. |

AS Unit F918: Caring for older people	
16.67% of the total AS GCE (Double Award) 1hr 30 mins written paper 100 marks	This paper has six questions

This unit is an optional part of the double award only and is externally assessed. |

4.3   Advanced GCE Scheme of Assessment

Advanced GCE in Health and Social Care (H503)

AS Units F910 – F912 as above, all units being 16.67% of the Advanced GCE marks.

A2 Unit F919: Care practice and provision

16.67% of the total Advanced GCE Coursework 50 marks	This unit is assessed through portfolio work This unit is internally assessed.

Candidates choose two of the following optional units, but must choose one of either Unit F920. Unit F921 or Unit F924.

A2 Unit F920: Understanding human behaviour and development

16.67% of the total Advanced GCE 1.5 hrs written paper 100 marks	This paper has six questions This unit is externally assessed

A2 Unit F921: Anatomy and physiology in practice

16.67% of the total Advanced GCE 1.5 hrs written paper 100 marks	This question paper has six questions: This unit is externally assessed.

A2 Unit F922: Child development

16.67% of the total Advanced GCE Coursework 50 marks	This unit is assessed through portfolio work This unit is internally assessed.

A2 Unit F923: Mental-health issues

16.67% of the total Advanced GCE Coursework 50 marks	This unit is assessed through portfolio work This unit is internally assessed.

A2 Unit F924: Social trends

16.67% of the total Advanced GCE 1.5 hrs written paper 100 marks	This question paper consists of five questions based on the pre-released case study stimulus material This unit is externally assessed.

A2 Unit F925: Research methods in health and social care

16.67% of the total Advanced GCE Coursework 50 marks	This unit is assessed through portfolio work This unit is internally assessed.

4.4 Advanced GCE Scheme of Assessment (Double Award)

AS and A2 Units as above, all units being 8.3% of the Advanced GCE (Double Award) marks. Candidates must take units F910 – F912 and F919, and should choose 3 units from F913 – F918 and 5 units from F920 – F925. Candidates must choose either Unit F913 or Unit F918.

For the Advanced Subsidiary GCE **two** units will be assessed internally, through a teacher-assessed portfolio (see Section 7) and **one** unit will be assessed externally with the assessment set and marked by OCR. These **three** units will be equally sized and equally weighted.

For the Advanced Subsidiary GCE (Double Award) at most **four** units will be assessed internally, through a teacher-assessed portfolio (see Section 7) and at least **two** units will be assessed externally with the assessment set and marked by OCR. These **six** units will be equally sized and equally weighted.

For the Advanced GCE at most **four** units will be assessed internally, through a teacher-assessed portfolio (see Section 7) and at least **two** units will be assessed externally with the assessment set and marked by OCR. These **six** units will be equally sized and equally weighted.

For the Advanced GCE (Double Award) at most **eight** units will be assessed internally, through a teacher-assessed portfolio (see Section 7) and at least **four** units will be assessed externally with the assessment set and marked by OCR. These **twelve** units will be equally sized and equally weighted.

The assessment will be conducted in accordance with the GCE Code of Practice.

4.5 External Assessment

External assessment forms at least 33% of each qualification:

Advanced Subsidiary GCE:	Candidates take **one** unit of external assessment.
Advanced Subsidiary GCE (Double Award):	Candidates take at least **two** units of external assessment.
Advanced GCE:	Candidates take at least **two** units of external assessment.
Advanced GCE (Double Award):	Candidates take at least **four** units of external assessment.

External assessments are 90 minutes. Unit F924: *Social trends* has pre-released case-study material which will be available to centres (once they have made their *provisional* candidate entries) approximately **six** weeks prior to the examination date.

The externally assessed units will be marked by OCR. The maximum raw score will be stated on the front cover of the question paper.

4.6 Portfolio Assessment

Internal assessment forms at most 67% of each qualification. Internally assessed units take the form of a portfolio of work designed to enable the candidate to demonstrate understanding of the content of the unit. Each internal assessment is set by the centre to OCR guidelines, is internally marked and externally moderated by OCR.

4.7 Unit Order

Units may be taken in any order, though centres are strongly advised to cover AS Units F910, F911 and F912 early in the course, since they form a core on which other units are based.

The normal order in which the unit assessments are designed to be taken is AS Units in the first year of a **two** year course, leading to an AS GCE award, then A2 Units are designed to be taken in the second year leading to the Advanced GCE award. However, the unit assessments may be taken in any order.

Alternatively, candidates may take a valid combination of unit assessments at the end of their AS GCE or Advanced GCE course in a 'linear' fashion.

Suggested schemes of assessment will be provided as part of the teacher resource material. Centres should also ensure all authentication documentation for every candidate is completed and kept securely with the work until moderation takes place.

4.8   Unit Options (at AS/A2)

There are no optional units in the AS GCE specification; for AS GCE in Health and Social Care candidates must take AS Units F910, F911 and F912.

There are optional units in the AS GCE (Double Award) specification; for AS GCE (Double Award) in Health and Social Care candidates must take AS Units F910, F911 and F912, and choose three Units from AS Units F913 – F918, but must choose either Unit F913 or Unit F918.

There are optional units in the Advanced GCE specification; for Advanced GCE in Health and Social Care candidates take AS Units F910, F911 and F912 *and* A2 Unit F919, and choose two Units from A2 Units F920 -F925, but must choose either Unit F920, F921 or F924.

There are optional units in the Advanced GCE (Double Award) specification; for Advanced GCE (Double Award) in Health and Social Care candidates must take AS Units F910, F911 and F912 *and* A2 Unit F919. Candidates choose three Units from AS Units F913 – F918, but must choose either Unit F913 or Unit F918. Candidates choose five Units from A2 Units F920 – F925.

4.9   Synoptic Assessment (A Level GCE)

Synoptic assessment at Advanced GCE is designed to ensure that candidates have a good understanding of the subject as a whole and are able to address issues within the subject from a range of perspectives and in an integrated way. The emphasis is on strategic understanding and on the ability to draw evidence together from any relevant areas of the specifications. Assessment focuses on the breadth, depth and quality of the candidate's analysis and evaluation and will be drawn from across the specifications and will involve candidates bringing together, and making connections.

In the context of health and social care, synoptic assessment involved assessment of candidates' ability to draw on their understanding of the connections between different aspects of health and social care represented in the specifications. Synoptic assessment is in Unit F919: *Care practice and provision.*

4.10 Assessment Availability

There is one examination series each year in June.

From 2014, both AS units and A2 units will be assessed in June only.

4.11 Assessment Objectives

Candidates are expected to demonstrate the following in a range of work related contexts:

AO1   Knowledge, Understanding and Skills

- Candidates demonstrate relevant knowledge, understanding and skills.

AO2   Application of Knowledge, Understanding and Skills

- Candidates apply knowledge, understanding and skills.

AO3   Research and Analysis

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

AO4   Evaluation

- Candidates evaluate evidence, make judgements and draw conclusions about work-related issues.

The assessment objectives are weighted as follows:

	AS Units	A2 Units	GCE and GCE (Double Award)
AO1	30-40%	10-30%	20-35%
AO2	20-30%	20-30%	20-30%
AO3	15-25%	25-35%	20-30%
AO4	15-25%	25-35%	20-30%

4.12 AO Weightings

The relationship between assessment objectives and the units of assessment is shown in the grids below.

AO Weightings in AS GCE

Unit of Assessment	Mandatory or Optional	Level	Percentages				Total
			AO1	AO2	AO3	AO4	
1	m	AS	30	30	20	20	100
2	m	AS	30	30	20	20	100
3	m	AS	30	30	20	20	100
		Total	90	90	60	60	300

AO Weightings in AS GCE (Double Award)

Unit of Assessment	Mandatory or Optional	Level	Percentages				Total
			AO1	AO2	AO3	AO4	
1	m	AS	30	30	20	20	100
2	m	AS	30	30	20	20	100
3	m	AS	30	30	20	20	100
4 or 9	o	AS	30	30	20	20	100
One of 4-9	o	AS	30	30	20	20	100
One of 4-9	o	AS	30	30	20	20	100
		Total	180	180	120	120	600

AO Weightings in Advanced GCE

Unit of Assessment	Mandatory or Optional	Level	Percentages				Total
			AO1	AO2	AO3	AO4	
1	m	AS	30	30	20	20	100
2	m	AS	30	30	20	20	100
3	m	AS	30	30	20	20	100
10	m	A2	20	20	30	30	100
One of 11, 12, 15	o	A2	20	20	30	30	100
One of 11-16	o	A2	20	20	30	30	100
		Total	150	150	150	150	600

AO Weightings in Advanced GCE (Double Award)

Unit of Assessment	Mandatory or Optional	Level	Percentages				Total
			AO1	AO2	AO3	AO4	
1	m	AS	30	30	20	20	100
2	m	AS	30	30	20	20	100
3	m	AS	30	30	20	20	100
4 or 9	o	AS	30	30	20	20	100
One of 4-9	o	AS	30	30	20	20	100
One of 4-9	o	AS	30	30	20	20	100
10	m	A2	20	20	30	30	100
One of 11, 12, 15	o	A2	20	20	30	30	100
One of 11, 12, 15	o	A2	20	20	30	30	100
One of 11-16	o	A2	20	20	30	30	100
One of 11-16	o	A2	20	20	30	30	100
One of 11-16	o	A2	20	20	30	30	100
		Total	300	300	300	300	1200

4.13 Quality of Written Communication

Quality of written communication is assessed in all units and credit may be restricted if communication is unclear.

Candidates will:

- Ensure that text is legible and that spelling, punctuation and grammar are accurate so that meaning is clear

- Select and use a form and style of writing appropriate to purpose and to complex subject matter

- Organise information clearly and coherently, using specialist vocabulary when appropriate.

5   Technical Information

5.1   Making Unit Entries

Please note that centres must be registered with OCR in order to make any entries, including estimated entries. It is recommended that centres apply to OCR to become a registered centre well in advance of making their first entries. Final entries for units (including internally assessed units) are made in March for June units. It is important that entries are received by the deadline date – late entries cause major problems for OCR and attract a substantial late entry fee to reflect this. Centres must have made an entry for a unit in order for OCR to supply the appropriate forms or moderator details for coursework.

It is essential that unit entry codes are quoted in all correspondence with OCR. See Sections 4.1 – 4.4 and 4.2 for these unit entry codes.

To enter for certification, candidates must have a valid combination of unencashed units for that qualification.

For Units F911, F912, F914, F915, F916, F917, F919, F922, F923 and F925 candidates must be entered for either component 01 or 02. Centres must enter all of their candidates for ONE of these components. It is not possible for centres to offer both components within the same series.

Unit Entry code	Component code	Submission method	Unit titles
F910	01	-	Promoting quality care
F911	01	OCR Repository	Communication in care settings
	02	Postal moderation	
F912	01	OCR Repository	Promoting good health
	02	Postal moderation	
F913	01	-	Health and safety in care settings
F914	01	OCR Repository	Caring for people with additional needs
	02	Postal moderation	
F915	01	OCR Repository	Working in early-years care and education
	02	Postal moderation	
F916	01	OCR Repository	Health as a lifestyle choice
	02	Postal moderation	
F917	01	OCR Repository	Complementary therapies

Unit Entry code	Component code	Submission method	Unit titles
	02	Postal moderation	
F918	01	-	Caring for older people
F919	01	OCR Repository	Care practice and provision
	02	Postal moderation	
F920	01	-	Understanding human behaviour and development
F921	01	-	Anatomy and physiology in practice
F922	01	OCR Repository	Child development
	02	Postal moderation	
F923	01	OCR Repository	Mental-health issues
	02	Postal moderation	
F924	01	-	Social trends
F925	01	OCR Repository	Research methods in health and social care
	02	Postal moderation	

5.2 Making Qualification Entries

Candidates must enter for qualification certification separately from unit assessment(s). If a certification entry is **not** made, no overall grade can be awarded.

Candidates may enter for:

- AS GCE certification (H103).

- AS GCE (Double Award) certification (H303)

- Advanced GCE certification (H503).

- Advanced GCE (Double Award) certification (H703)

A candidate who has completed all the units required for the qualification, and who did not request certification at the time of entry, may enter for certification either in the same examination series (within a specified period after publication of results) or in a later series.

Candidates following a course over a number of examination series have a variety of options open to them that allow them to certificate part-way through their course. All three- and six-unit qualifications are automatically 'banked' by OCR to enable the candidate to use them towards larger qualifications at a later date.

Candidates may enter for:

- Advanced Subsidiary GCE aggregation

- Advanced Subsidiary GCE aggregation, bank the result, and complete the Advanced Subsidiary GCE (Double Award) assessment at a later date

- Advanced Subsidiary GCE aggregation, bank the result, and complete the A2 assessment at a later date for either an Advanced GCE or an Advanced GCE (Double Award)

- Advanced Subsidiary GCE (Double Award) aggregation

- Advanced Subsidiary GCE (Double Award) aggregation, bank the result, and complete the A2 assessment at a later date for either an Advanced GCE or an Advanced GCE (Double Award)

- Advanced GCE aggregation

- Advanced GCE aggregation, bank the result, and complete the Advanced GCE (Double Award) assessment at a later date

- Advanced GCE (Double Award) aggregation.

Candidates must enter the appropriate Advanced Subsidiary units to qualify for the Advanced Subsidiary GCE (Double Award).

Candidates must enter the appropriate AS and A2 units to qualify for the Advanced (Single or Double Award) GCE.

These specifications will be shown on the certificate as:

> OCR Advanced Subsidiary GCE in Health and Social Care.
> OCR Advanced Subsidiary GCE in Health and Social Care (Double Award).
> OCR Advanced GCE in Health and Social Care.
> OCR Advanced GCE in Health and Social Care (Double Award).

5.3   Issue of Results

Individual unit Statements of Results will be issued in August for June entries for all units (both portfolio units and external units). Statements of Results will include, for each unit, the unit title, the unit UMS mark, the grade and the date the unit was taken.

Certification is **not** an automatic process, since OCR is unable to determine at which point a candidate wishes to complete their course. Candidates **must** be entered for the appropriate certification code (see Section 5.2) to claim their overall grade.

Entry for unit will *not* generate a final certificate – a separate certification entry must be made at the appropriate time. If it is not, there will be a delay in issuing the candidate's final grade.

5.4   Grading

All GCE units are awarded A to E. The Advanced Subsidiary GCE is awarded on the scale A to E. The Advanced GCE is awarded on the scale A to E with access to an A*. To be awarded an A*, candidates will need to achieve a grade A on their full A Level qualification and an A* on the aggregate of their A2 units. Grades are reported on certificates. Results for candidates who fail to

achieve the minimum grade (E or e) will be recorded as *unclassified* (U or u) and this is **not** certificated.

A Uniform Mark Scale (UMS) enables aggregation of candidates' best performances across units and series to determine the qualification grade. The three-unit AS GCE has a total of 300 *uniform* marks and the six-unit Advanced Subsidiary (Double Award) GCE has a total of 600 *uniform* marks. The six-unit Advanced GCE has a total of 600 *uniform* marks and the twelve-unit Advanced (Double Award) GCE has a total of 1200 *uniform* marks.

OCR converts the candidate's *raw* mark for each unit to a *uniform* mark. The maximum *uniform* mark for any unit depends on that unit's weighting in the specification. In these Applied Health and Social Care specifications, all the units have equal UMS weightings with a *uniform* mark total of 100 for each unit. Each unit's *raw* mark grade boundary equates to the *uniform* mark boundary at the same grade. Intermediate marks are converted on a pro-rata basis.

Uniform marks correspond to *unit* grades as follows:

(Advanced GCE) Unit Weighting	Maximum Unit Uniform Mark	Unit Grade					
		a	b	c	d	e	u
16.67%	100	100-80	79-70	69-60	59-50	49-40	39-0

OCR adds together the unit *uniform* marks and compares these to pre-set boundaries (see the table below) to arrive at *qualification* grades.

Qualification	Qualification Grade					
	A	B	C	D	E	U
AS GCE	300-240	239-210	209-180	179-150	149-120	119-0
Advanced GCE	600-480	479-420	419-360	359-300	299-240	239-0

Qualification	Qualification Grade									
	AA	AB	BB	BC	CC	CD	DD	DE	EE	U
AS GCE (Double Award)	600-480	479-450	449-420	419-390	389-360	359-330	329-300	299-270	269-240	239-0
Advanced GCE (Double Award)	1200-960	959-900	899-840	839-780	779-720	719-660	659-600	599-540	539-480	479-0

Candidates who fail to achieve the standard for a grade EE will be awarded a Uniform Mark in the range 0-239 for the Advanced Subsidiary GCE (Double Award) and 0-479 for the Advanced GCE (Double Award) and will be recorded as U (unclassified). This does not lead to a certificate.

5.5   Enquiries about Results

Under certain circumstances, a centre may wish to query the result issued to one or more candidates. Enquiries about Results for GCE units must be made immediately following the series in which the relevant unit was taken (by the Enquiries about Results deadline).

Please refer to the *JCQ Post-Results Services* booklet and the *OCR Admin Guide* for further guidance about action on the release of results. Copies of the latest versions of these documents can be obtained from the OCR website.

5.6   Shelf-Life of Units

Individual unit results, prior to certification of the qualification, have a shelf-life limited only by that of the qualification.

5.7   Unit and Qualification Re-sits

There is no restriction on the number of times a candidate may re-sit each unit before entering for certification for an AS GCE or Advanced GCE.

Candidates may enter for the full qualifications an unlimited number of times.

5.8   Guided Learning Hours

Each unit requires 60 guided learning hours.

AS GCE in Health and Social Care requires **180** guided learning hours in total.
AS GCE in Health and Social Care (Double Award) requires **360** guided learning hours in total.

Advanced GCE in Health and Social Care requires **360** guided learning hours in total.
Advanced GCE in Health and Social Care (Double Award) requires **720** guided learning hours in total.

5.9   Code of Practice/Subject Criteria/Common Criteria Requirements

These specifications comply in all respects with the revised *GCSE, GCE and AEA Code of Practice as available on the QCA website*, the subject criteria for GCE in Health and Social Care and *The Statutory Regulation of External Qualifications 2004*.

5.10   Disability Discrimination Act Information Relating to this Specification

GCEs often require assessment of a broad range of competences. This is because they are general qualifications and, as such, prepare candidates for a wide range of occupations and higher level courses.

The revised GCE qualifications and subject criteria were reviewed to identify whether any of the competences required by the subject presented a potential barrier to any disabled candidates. If this was the case, the situation was reviewed again to ensure that such competences were included only where essential to the subject. The findings of this process were discussed with disability groups and with disabled people.

Reasonable adjustments are made for disabled candidates in order to enable them to access the assessments and to demonstrate what they know and can do. For this reason, very few candidates

will have a complete barrier to the assessment. Information on reasonable adjustments is found in *Access Arrangements, Reasonable Adjustments and Special Consideration* produced by the Joint Council www.jcq.org.uk.

Candidates who are unable to access part of the assessment, even after exploring all possibilities through reasonable adjustments, may still be able to receive an award based on the parts of the assessment they have taken.

5.11 Arrangements for Candidates with Particular Requirements

For candidates who are unable to complete the full assessment or whose performance may be adversely affected through no fault of their own, teachers should consult the *Access Arrangements, Reasonable Adjustments and Special Consideration*. In such cases advice should be sought from OCR as early as possible during the course.

5.12 Classification Code

Every specification is assigned to a national classification code indicating the subject area to which it belongs. The classification code for these specifications is 0003.

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

Centres may wish to advise candidates that, if they take two specifications with the same classification code, schools and colleges are very likely to take the view that they have achieved only one of the two GCEs. The same view may be taken if candidates take two GCE specifications that have different classification codes but have significant overlap of content. Candidates who have any doubts about their subject combinations should seek advice, for example from their centre or the institution to which they wish to progress.

6 Coursework Administration/Regulations

6.1 Supervision and Authentication

As with all coursework, teachers must be able to verify that the work submitted for assessment is the candidate's own work. Sufficient work must be carried out under direct supervision to allow the teacher to authenticate the coursework marks with confidence.

OCR expects teachers to supervise and guide candidates who are producing portfolios. The degree of teacher guidance in candidates' work will vary according to the kind of work being undertaken. However, it should be remembered that candidates are required to reach their own judgements and conclusions.

When supervising candidates, teachers are expected to:

- Offer candidates advice about how best to approach their tasks

- Exercise continuing supervision of work in order to monitor progress and to prevent plagiarism

- Ensure that the work is completed in accordance with the specification requirements and can be assessed in accordance with the specified marking criteria and procedures.

Work on portfolios may be undertaken outside the centre and in the course of normal curriculum time. As with all internally assessed work, the teacher must be satisfied that the work submitted for assessment is the candidate's own work. This does not prevent groups of candidates working together in the initial stages, but it is important to ensure that the individual work of a candidate is clearly identified separately from that of any group in which they work.

Throughout the course, the teacher should encourage the candidate to focus on achieving the criteria listed in the *Assessment Evidence Grids.*

Once the mark for the unit portfolio has been submitted to OCR, no further work may take place. However, the portfolio can be improved and resubmitted under the re-sit rule (Section 5.7)

Teachers may comment on a candidate's unit portfolio and return it for redrafting without limit until the deadline for the submission of marks to OCR.

Teachers must record details of any assistance given and this must be taken into account when assessing candidates' work.

Teachers must complete and sign the *Centre Authentication Form* to confirm that the work submitted for moderation was produced by the candidates concerned. Once completed this form must be sent to the moderator along with candidates' work.

6.2 Avoiding Plagiarism

Plagiarism in coursework is the equivalent of cheating in written examinations.

Candidates should be taught how to present material taken directly from other sources and must observe the following when producing portfolios:

- Any copied material must be suitably acknowledged

- Quotations must be clearly marked and a reference provided wherever possible.

6.3   Submitting Marks to OCR

Centres must have made an entry for a unit in order for OCR to supply the appropriate forms or moderator details for coursework. Coursework administration documents are sent to centres on the basis of estimated entries. Marks may be submitted to OCR either via Interchange on the computer-printed Coursework Mark Sheets (MS1) provided by OCR (sending the top copy to OCR and the second copy to their allocated moderator) or by EDI (centres using EDI are asked to print a copy of their file and sign it before sending to their allocated moderator).

Teachers may set internal deadlines for candidates submitting work to them. However, should candidates fail to meet this deadline, they may only be penalised if they fail to achieve one or more of the criteria in the *Assessment Evidence* Grid for that unit. A candidate whose work is submitted so late that the teacher is unable to meet OCR's deadline for receipt of marks should be warned by the teacher that failure to submit marks by this deadline may result in OCR failing to issue grades on the agreed date. OCR will supply centres with MS1 Internal Assessment Mark Sheets to record the marks and instructions for completion. It is essential that centres send the top copy of these completed forms to OCR, the second copy to the Moderator and keep the third copy for their own records.

The deadlines for the receipt of coursework marks are published on the OCR website.

The awarding body must require centres to obtain from each candidate a signed declaration that authenticates the coursework they produce as their own. For regulations governing coursework, centres should consult the OCR *Admin Guide: 14- 19 Qualifications*. Further copies of the coursework administration documents are available on the OCR website (www.ocr.org.uk).

6.4   The Assessment Evidence Grids

Centres are required to carry out internal assessment of portfolios using the *Assessment Evidence Grids* in accordance with OCR procedures. Candidates' marks are recorded on these grids. **One** grid should be completed for each candidate's **unit** portfolio. The information on each of these grids should eventually be transferred onto a *Unit Recording Sheet* and attached to the front of the candidate's portfolio for the unit for inspection by the Moderator when the moderation process takes place.

When candidates are given their assignments, they should also be issued with a reference copy of the appropriate *Assessment Evidence Grid*.

Candidates' portfolios must be clearly annotated to demonstrate where, and to what level, criteria have been achieved. This will help in the moderation process. On completion of a unit, the teacher must complete the *Assessment Evidence Grid* and award a mark out of **50** for the unit.

6.5   Standardisation and Moderation

All internally-assessed coursework is marked by the teacher and internally standardised by the centre. Marks must be submitted to OCR by the agreed date, after which moderation takes place in accordance with OCR procedures.

Internal standardisation can be done in a number of ways. In the first year, reference material and OCR training meetings will provide a basis for centres' own standardisation. In subsequent years, this, or centres' own archive material, may be used. Centres are advised to hold a preliminary meeting of staff involved to compare standards through cross-marking a small sample of work.

After most marking has been completed, a further meeting at which work is exchanged and discussed will enable final adjustments to be made.

The purpose of moderation is to ensure that the standard for the award of marks in internally-assessed coursework is the same for each centre, and that each teacher has applied the standards appropriately across the range of candidates within the centre.

Work submitted for moderation must be marked with the:

- Centre number

- Centre name

- Candidate number

- Candidate name

- Specification code and title

- Unit code.

For each (portfolio) unit, centres must complete the appropriate *Unit Recording Sheet* sent out annually by OCR and downloadable from the OCR website (www.ocr.org.uk).

Work submitted on paper for moderation or marking must be secured by treasury tags. Work submitted in digital format (CD or online) must be in a suitable file structure as detailed in Appendix C.

6.6   Centre Accreditation

If your centre demonstrates accurate marking of internally assessed units, your centre may be offered accredited status (by specification and level). This means that there is **no** requirement to submit work for moderation for those specifications.

Eligibility for accreditation is offered to a Programme Leader (nominated by the centre), who is responsible for the standardisation of internal assessment and must be personally involved in the assessment of candidates' work.

In each examination series, a number of accredited centres will be randomly selected for moderation as part of the control procedure. Every accredited centre will be 'sampled' at least once in every period of accreditation.

The standard accreditation period lasts for the remainder of the academic year in which it is granted and the following two academic years although the period of accreditation may be altered on the basis of the results of the random sampling. Centres will be informed of any changes to their accreditation status before each series.

Centres must ensure that:

- The Head of Centre provides the Programme Leader details and initially accepts accreditation for each level

- OCR is informed if the Programme Leader leaves the post or their responsibilities change with respect to the specification(s)

- All marks are submitted to OCR by the published deadlines

- Centre Authentication forms for accredited units with entries are completed and submitted to OCR Data Capture each series.

However, centres must have work available in case they receive requests for work required for awarding purposes.

6.7   Minimum Coursework Required

If a candidate submits no work for a unit, then the candidate should be indicated as being absent from that unit on the coursework mark sheets submitted to OCR. If a candidate completes any work at all for that unit then the work should be assessed according to the criteria and marking instructions and the appropriate mark awarded, which may be zero.

6.8   Instructions for Marking

Sources of Guidance

The starting point in assessing portfolios is the *Assessment Evidence Grid* within each unit. These contain levels of criteria for the skills, knowledge and understanding that the candidate is required to demonstrate. The *Guidance for Teachers* within the unit expands on these criteria and clarifies the level of achievement the assessor should be looking for when awarding marks.

OCR will hold training meetings on portfolio assessment led by senior GCE moderators. Details of these are in the OCR INSET booklets which are sent to centres in the summer term or they may be obtained from the Training and Customer Support Division (tel. 01223 552950). They are also published on the OCR website (www.ocr.org.uk).

OCR also operates a network of Portfolio Consultants. Centres can obtain advice on assessment of portfolios from an OCR Portfolio Consultant. These are both subject specialists and senior moderators. Details may be obtained from the OCR Qualification Manager.

Determining a candidate's mark

It must be stressed that teachers determine only the *mark* for a candidate's portfolio evidence and not the *grade* which will be determined by OCR.

Regular, early and constructive feedback to candidates on their performance is essential and crucial. Help with planning and structuring their portfolio work in a logical manner throughout the course will lead to better understanding of their work and is likely to achieve higher grades.

Giving candidates deadlines for the completion of various sections of their work, and encouraging them to adhere to them, is also essential if candidates are not going to rush to complete and possibly finish up with grades below their potential.

Each portfolio should be marked by the teacher according to the assessment objectives and content requirements in the *Assessment Evidence Grid* within each portfolio unit (a sample of which follows).

Each row in the *grid* comprises a strand showing the development of an assessment objective, each row corresponding to an assessment objective descriptor in the banner (the top section of the *grid*).

The maximum mark for each strand is shown in the far right hand column of the *grid* and this maximum mark is further broken down into a number of mark bands across each row with a range of descriptors.

Teachers use their professional judgement to determine which descriptor in a strand best suits the candidate's work and from the range of marks available within that particular mark band, they circle the mark that best fits the work. They then record this mark in the column headed *Mark.*

Teachers should use the full range of marks available to them. Teachers must award full marks in any strand of work which fully meets the criteria. This is work which is the best one could expect from candidates working at AS or A2 level.

However, for strands which include a quantified element, e.g. **two** practitioners or **four** therapies, and where a candidate's evidence includes less than the number specified, or includes the correct number but at varying levels of quality, teachers will use their professional judgement to allocate an appropriate mark. It is the *quality* of the evidence that is paramount rather than the *quantity*, although, in such circumstances, candidates will be unable to access the highest mark band for that strand.

Only **one** mark per strand/row will be entered. The final mark for the candidate is out of a total of **50** and is found by totalling the marks for each strand.

6.9   Administering Portfolio Assessment and Moderation

Portfolio units are internally assessed by centres and externally moderated by OCR. There are **three** key points in the administrative cycle that require action by the teacher:

The centre enters candidates who wish to submit portfolios (March for June examinations)

The centre sends OCR and the moderator a set of provisional marks by a set deadline.

The moderator contacts the centre on receipt of marks and asks for a sample of work.

OCR will conduct all administration of the GCE through the Examination Officer at the centre. Teachers are strongly advised to liaise with their Examination Officer to ensure that they are aware of key dates in the administrative cycle.

Assessment-recording materials and full details of administrative arrangements for portfolio assessment, will be forwarded to Examination Officers, following receipt of provisional entries. At the same time the materials will be made available within *Portfolio Assessment Packs* and on the OCR website (www.ocr.org.uk). The materials will include master copies of mandatory *Unit Recording Sheets* on which to transfer the assessments from each candidate's *Assessment Evidence Grids.* Forms may be photocopied and used as required.

6.10 OCR Repository

The OCR Repository allows centres to submit moderation samples in electronic format.

The OCR GCE in Health and Social Care units (F911, F912, F914, F915, F916, F917, F919, F922, F923, F925) can be submitted electronically to the OCR Repository via Interchange: please check section 5.1 for unit entry codes for the OCR Repository.

More information on the OCR Repository can be found in Appendix C: Guidance for the Production of Electronic Coursework Portfolio. Instructions for how to upload files to OCR using the OCR Repository can be found on OCR Interchange.

7 Other Specification Issues

7.1 Overlap with other Qualifications

There is a significant degree of overlap between the content of these specifications and those for GCE in Food, Nutrition and Health, although it is expected that the teaching and assessment methods will be significantly different. Some units complement units within the GCEs in Science.

7.2 Progression from these Qualifications

These specifications are designed to give a broad introduction to this sector and aim to prepare candidates for further study in higher education or further training which might be whilst in employment. However, these qualifications are not designed for candidates' direct entry into employment.

Candidates who achieve these qualifications may be prepared to enter a variety of HND or degree level courses in health and social care related subjects.

7.3 Key Skills Mapping

These specifications provide opportunities for the development of the Key Skills of *Communication*, *Application of Number*, *Information Technology*, *Working with Others*, I*mproving Own Learning and Performance* and *Problem Solving* at Levels 2 and/or 3. However, the extent to which this evidence fulfils the Key Skills criteria at these levels will be totally dependent on the style of teaching and learning adopted for each unit.

The following table indicates where opportunities *may* exist for at least some coverage of the various Key Skills criteria at Levels 2 and/or 3 for each unit.

Unit	C2				C3				AoN2			AoN3			ICT2			ICT3			WwO2			WwO3			IoLP2			IoLP3			PS2			PS3			Unit
	.1a	.1b	.2	.3	.1a	.1b	.2	.3	.1	.2	.3	.1	.2	.3	.1	.2	.3	.1	.2	.3	.1	.2	.3	.1	.2	.3	.1	.2	.3	.1	.2	.3	.1	.2	.3	.1	.2	.3	
F910	F	F	F	P	F	F	F	P																															F910
F912				P											P	P	P				P	P	P	P	P	P	P	P	P	F	F	F							F912
F914				P			P																																F914
F915																											P	P	P	F	F	F							F915
F916		F					F								P	P	P										P	P	P	F	F	F							F916
F917									P	P	P				P	P	P																						F917
F922																											P	P	P	F	F	F							F922
F923	F		F		F		F																																F923
F925		F	F	P		F	F	P																			P	P	P	F	F	F							F925
Unit	.1a	.1b	.2	.3	.1a	.1b	.2	.3	.1	.2	.3	.1	.2	.3	.1	.2	.3	.1	.2	.3	.1	.2	.3	.1	.2	.3	.1	.2	.3	.1	.2	.3	.1	.2	.3	.1	.2	.3	Unit
	C2				C3				AoN2			AoN3			ICT2			ICT3			WwO2			WwO3			IoLP2			IoLP3			PS2			PS3			

7.4 Spiritual, Moral, Ethical, Social, Legislative, Economic and Cultural Issues

Health and Social Care offers a range of opportunities for the exploration of spiritual, moral, ethical, social and cultural issues.

It is expected that these specifications will be presented in ways which give scope for perspectives on control and direction of the health and social care environment, the relationship between health and social care organisations and behaviour within organisations which include ethical, moral and social dimensions. This is particularly appropriate in considering the way in which services are managed, the management and use of human and financial resources and the ways in which services are promoted.

Specific social issues may be addressed in Unit F910: Promoting quality care, Unit F914: Caring for people with additional needs, Unit F918: Caring for older people, Unit F922: Child development and Unit F924: Social trends.

Moral, ethical and spiritual issues are inherent throughout any Health, Social Care and Early-Years qualification, but may be particularly relevant in Unit F910: *Promoting quality care*, Unit F911: *Communication in care settings*, Unit F914: *Caring for people with additional needs*, Unit F918: *Caring for older people*, Unit F920: *Understanding human behaviour and development* and Unit F923: *Mental-health issues*.

Cultural issues are explored in Unit F916: *Health as a lifestyle choice*, and Unit F922: *Child development*.

Legal issues are addressed in each unit, where appropriate.

7.5 Sustainable Development, Health and Safety Considerations and European Developments

OCR 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 assessments.

The role of the environment is considered in Unit F911: *Communication in care settings*, Unit F920: *Understanding human behaviour and development*, Unit F922: *Child development* and Unit F924: *Social trends.*

Candidates are introduced to health and safety issues in the context of this sector and should be made aware of the significance of safe working practices. Health and safety issues are specifically addressed in Unit F913: *Health and safety in care settings.*

It should also be noted that Health and Social Care, as a subject area for the 14-19 age group, presents many issues in terms of legislation which governs the care of others. Centres should be familiar with current legislation and its effects on candidates' access to, and involvement with, care settings. All units in this specification will require careful consideration of the potential impact of legislation relating to health and safety issues.

European examples should be used where appropriate in the delivery of the subject content. Relevant European legislation is identified within the specification where applicable.

Teachers are expected to take appropriate opportunities to consider issues in the European context.

The European Dimension can be considered as part of Unit F922: *Child development*, to be used as a comparison against provision/achievement in the UK.

However, there are no sustainable development issues or health and safety considerations in these specifications.

7.6   Avoidance of Bias

OCR has taken great care in preparation of these specifications and assessment materials to avoid bias of any kind.

7.7   Language

These specifications and associated assessment materials are in English only.

7.8   Status in Wales and Northern Ireland

This specification has been approved by DCELLS for use by centres in Wales and by CCEA for use by centres in Northern Ireland.

Candidates in Wales or Northern Ireland should not be disadvantaged by terms, legislation or aspects of government that are different from those in England. Where such situations might occur, including in the external assessment, the terms used have been selected as neutral, so that candidates may apply whatever is appropriate to their own situation.

7.9   Citizenship

Citizenship issues are inherent throughout any Health, Social Care and Early-years qualification and there are opportunities for delivering knowledge, skills and understanding of such issues throughout the course.

Appendix A: Performance Descriptions

Performance descriptions have been created for all GCE subjects. The performance descriptions for GCE in Health and Social Care aim to describe learning outcomes and levels of attainment likely to be shown by a representative candidate performing at the A/B and E/U boundaries for the AS and A2. They illustrate the expectations at these boundaries for the AS and A2 as a whole; they have not been written at a specification or unit level. Each performance description is aligned to **one** assessment objective. An alphabetical system has been used to denote each element of a performance description. There is no hierarchy of elements.

Performance descriptions are designed to assist examiners in exercising their professional judgement at awarding meetings where the grade A/B and E/U boundaries will be set by examiners using professional judgement. This judgement will reflect the quality of the candidates' work, informed by the available technical and statistical evidence. Performance descriptions will be reviewed continually and updated where necessary.

Teachers may find performance descriptions useful in understanding candidates' performance across qualifications as a whole but should use the marking criteria identified in the specification when assessing candidates' work.

	Assessment Objective 1	Assessment Objective 2	Assessment Objective 3	Assessment Objective 4	Quality of Written Communication
Assessment Objectives for both AS GCE and Advanced GCE	• Candidates demonstrate relevant knowledge, understanding and skills.	• Candidates apply knowledge, understanding and skills.	• Candidates use appropriate research techniques to obtain information from a range of sources. They analyse work related issues and problems.	• Candidates evaluate evidence, make reasoned judgements and draw valid conclusions about work related issues.	
AS A/B boundary Performance Descriptions	Candidates: • Demonstrate with few omissions, a depth of knowledge of the health and social care sector • Demonstrate a depth of understanding of the functions of the health and social care sector • Demonstrate a range of relevant work related skills in a variety of situations in an effective manner.	Candidates; • Apply knowledge, understanding and skills accurately and independently to a range of work related situations relating to different people who use services.	Candidates: • Undertake research using a range of techniques; • Use a wide range of relevant information sources • Use the selected information to analyse work related issues and problems.	Candidates: • Evaluate evidence to draw valid conclusions • Make reasoned judgements about relevant work related issues.	Candidates use written expression which: • Conveys appropriate meaning • Uses appropriate specialist vocabulary.
AS E/U boundary Performance Descriptions	Candidates: • Demonstrate basic knowledge of the health and social care sector. There may be significant omissions • Show a basic understanding of the purposes of the health and social care sector • Demonstrate a limited range of work related skills.	Candidates: • Apply knowledge, understanding and skills with guidance to people who use services and familiar work related contexts.	Candidates: • Collect information on work related issues using given techniques • Use a limited range of relevant information sources • Carry out some basic analysis of work related issues and problems.	Candidates: • Evaluate evidence to draw basic conclusions about relevant work related issues.	Candidates use written expression which: • Is adequate to convey meaning • May be expressed in a non-specialist way.
A2 A/B boundary Performance Descriptions	Candidates: • Demonstrate in-depth knowledge of the health and social care sector • Show in-depth understanding of the functions of the health and social care sector • Demonstrate a range of work related skills in a variety of situations in an effective manner.	Candidates: • Accurately and independently apply in-depth knowledge, understanding and skills to a wide range of work related situations, relating these as appropriate to different contexts and people who use services.	Candidates: • Select and justify use of research and analytical techniques • Select and justify use of a wide range of relevant information sources • Select and justify use of the selected techniques and information to analyse work related issues and problems.	Candidates: • Evaluate a range of evidence to draw and justify valid conclusions • Make well reasoned judgements about relevant work related issues.	Candidates use written expression which: • Conveys appropriate meaning • Uses appropriate specialist vocabulary.

A2 E/U boundary Performance Descriptions	Candidates: - Demonstrate basic knowledge of the health and social care sector - Show basic understanding of the purposes of the health and social care sector. There may be significant omissions - Demonstrate a limited range of work related skills.	Candidates: Apply knowledge, understanding and skills with guidance to people who use services and work related contexts.	Candidates; - Undertake research into work related issues using given techniques - Use a limited range of relevant information sources - Use collected information to carry out a straightforward analysis of work related issues and problems.	Candidates: - Evaluate evidence to draw basic conclusions about relevant work related issues. - Identify strengths and weaknesses of the evidence.	Candidates use written expression which: - Is adequate to convey meaning - May be expressed in a non-specialist way.

Appendix B: Coursework Assessment Evidence Grids

Unit F911 - Assessment Evidence Grid

Unit F911: Communication in care settings

What the candidate needs to do:

Candidate needs to produce a report based on the different communication used in health or social care or early-years settings [**50 marks**].
The evidence needs to include:
AO1: an understanding of the different types of communication used in care settings and the factors that support and inhibit communication, giving examples [**15**];
AO2: an explanation of how practitioners in **one** setting use **four** different communication skills and apply values of care, giving examples [**15**];
AO3: relevant research and analysis of **two** theories that provide guidance about the effects of communication on people who use the service and/or practitioners within the setting [**10**];
AO4: the production of records to show the effectiveness of their communication in an interaction with a person who uses services/practitioner *or* a small group of people who use services/practitioners, evaluating their own performance and making recommendations for improvements [**10**].

How candidate will be assessed:

Assessment Objective	Mark Band 1	Mark Band 2	Mark Band 3	Mark
AO1	Candidates produce a basic description of the different types of communication used in care settings and the factors that support and inhibit communication, giving examples; **[0 1 2 3 4 5]**	candidates show a sound level of understanding of the different types of communication used in care settings and the factors that support and inhibit communication, giving examples; **[6 7 8 9 10]**	candidates show an in-depth understanding of the different types of communication used in care settings and the factors that support and inhibit communication, giving examples. **[11 12 13 14 15]**	/15
AO2	Candidates describe, with guidance, how practitioners in one setting use **four** different communication skills and apply the values of care, giving examples; Ability to communicate using some appropriate terminology. Sentences have limited coherence and structure, often being of doubtful relevance to the main focus of the AO. Errors of grammar, punctuation and spelling may be noticeable and intrusive. **[0 1 2 3 4 5]**	candidates give a detailed description of how practitioners in one setting use **four** different communication skills and apply the values of care, giving examples; Limited ability to organise relevant material. Some appropriate terminology used. Sentences are not always relevant with material presented in a way that does not always address the AO. There may be noticeable errors of grammar, punctuation and spelling. **[6 7 8 9 10]**	candidates produce, accurately and independently, a comprehensive explanation of how practitioners in one setting use **four** different communication skills and apply the values of care, giving examples; Ability to present relevant material in a planned and logical sequence. Appropriate terminology used. Sentences, for the most part, relevant and presented in a balanced, logical and coherent manner which addresses the AO. There will be occasional errors of grammar, punctuation and spelling. **[11 12 13 14 15]**	/15

Unit F911: Communication in care settings (continued)				
Assessment Objective	**Mark Band 1**	**Mark Band 2**	**Mark Band 3**	**Mark**
AO3	Candidates collect information from limited sources to analyse, at a basic level, how **two** theories provide guidance about the effects of communication on the people who use the service and/or practitioners; **[0 1 2 3 4]**	candidates undertake research using a range of sources, to give a sound analysis of how **two** theories provide guidance about the effects of communication on the people who use the service and/or practitioners; **[5 6 7]**	candidates undertake research using a range of appropriate sources to give a comprehensive analysis showing how **two** theories provide guidance about the effects of communication on the people who use the service and/or practitioners. **[8 9 10]**	**/10**
AO4	Candidates produce records of an interaction with a person who uses services/practitioner *or* a small group of people who use services/practitioners, including a basic evaluation of their own performance and giving an outline of improvements; **[0 1 2 3 4]**	candidates produce records of an interaction with a person who uses services/practitioner *or* a small group of people who use services/practitioners, including a sound evaluation of their own performance and making realistic recommendations for improvements; **[5 6 7]**	candidates produce records showing their effectiveness in the interaction with a person who uses services/practitioner *or* a small group of people who use services/practitioners and a comprehensive evaluation of their own performance, making realistic and informed recommendations for improvement. **[8 9 10]**	**/10**
			Total mark awarded:	**/50**

Amplification of Criteria

The further guidance below amplifies the criteria in the Assessment Evidence Grid and will help to determine the appropriate mark to be awarded for each strand.

AO	Mark Band	Characteristics of the work one may expect to see at this mark band can be summarised as follows:
AO1	1	Candidates will give a basic description of the different types of communication used in care settings – this will include written, oral, computerised and special methods; the description will be general and the candidate attempts to show how people are valued and supported by the different types of communication; they will give a basic description of how communication can be supported and inhibited by factors which can influence communication, which include the use of the values of care – examples may be given; the evidence will lack detail about the effects on people who use services and/or practitioners and may contain some omissions and/or inaccuracies;
	2	Candidates will give a sound description of the different types of communication used in care settings – this will include written, oral, computerised and special methods; the description will be detailed and needs to show how people are valued and supported by the different types of communication; they will give a sound description of how communication can be supported and inhibited by factors which can influence communication which includes the use of the values of care– examples will be given; there will be a few minor omissions with the evidence showing a sound understanding of the effects and support that people who use services/practitioners experience;
	3	Candidates will give an comprehensive description of the different types of communication used in care settings – this will include written, oral, computerised and special methods; the description will be comprehensive and clearly shows how people are valued and supported by the different types of communication; they will show a high level of understanding of how communication can be supported and inhibited by factors which can influence communication which includes the use of the values of care – a wide range of appropriate examples will be given; there will be no omissions with the evidence; there will be evidence of synthesis and originality within the work
AO2	1	Candidates will give a basic description of **four** communication skills used by practitioners in the care setting, including reasons for using each skill; candidates will attempt to show how people who use the service are valued and supported by the application of values of care and the appropriate use of communication skills – examples will be given; there may be significant omissions; it is expected that candidates in this mark band will require teacher-led guidance; candidates will write in a manner which is adequate to convey meaning, although it will be expressed in a non-specialist manner

AO	Mark Band	Characteristics of the work one may expect to see at this mark band can be summarised as follows:
AO2	2	Candidates will give a detailed description of **four** communication skills used by practitioners in the care setting, including reasons for using each skill; candidates show a sound level of understanding of how people who use the service are valued and supported by the application of the values of care and appropriate use of communication skills – examples will be given; there will be few omissions – it is expected that the candidates in this mark band will complete the work with minimal guidance; candidates will write in a manner which conveys meaning, using specialist vocabulary with few errors/inaccuracies;
	3	Candidates give a detailed and comprehensive explanation of **four** communication skills used by practitioners in the care setting – this will include detailed discussion of reasons for using each skill; candidates show a high level of understanding of how people who use the service are valued and supported by the application of the values of care and appropriate use of communication skills – a wide range of appropriate examples will be given; there will be evidence of synthesis and originality within the work; there will be no omissions - it is expected that the candidates in this mark band will complete the work accurately and independently; candidates will write in a manner which conveys appropriate meaning, using specialist vocabulary with accuracy – there will be no errors/inaccuracies.
AO3	1	Candidates will attempt to use information from a limited range of sources, e.g. books, for **two** theories of communication, and describe at a basic level how these theories provide guidance about how to communicate effectively with people who use the service/practitioners; they will attempt to consider, at a basic level, how these theories of communication can affect people who use the service/practitioners; candidates will show a limited ability to include relevant and factual information – there may be significant errors/omissions;
	2	Candidates will demonstrate the ability to use information from a range of sources, e.g. books and the Internet, for **two** theories of communication; they will describe in detail, showing a sound level of understanding, how these theories provide guidance about how to effectively communicate with people who use the service/practitioners; they show a sound level of understanding of how these theories of communication can affect people who use the service/practitioners; the research will be detailed, showing the use of a range of sources and candidates will include relevant and accurate factual information which has been presented coherently – there will be few, if any, errors/omissions;
	3	Candidates will demonstrate the ability to select and use appropriate information from a wide range of sources, e.g. books and the Internet, for at least **two** theories of communication; they give a comprehensive explanation, showing a high level of understanding, of how these theories provide guidance about how to effectively communicate with people who use the service/practitioners; they show a high level of understanding of how these theories of communication can affect people who use the service/practitioners; candidates include a range of relevant and accurate factual information which shows evidence of synthesis and originality – there will be no errors/omissions.

AO	Mark Band	Characteristics of the work one may expect to see at this mark band can be summarised as follows:
AO4	1	Candidates will attempt to provide basic records of **one** interaction with a person who uses services/practitioner *or* a small group of people who use services/practitioners – these will be supported by records of observation; the information considers, at a basic level, the skills used, the factors that supported and/or inhibited the interaction and information which shows how the values of care were applied; candidates produce a basic evaluation of their own performance from the communication with the person/people who use services/practitioner(s), with an attempt to identify improvements that could be made – there may be some minor errors/omissions;
	2	Candidates will provide sound records of **one** interaction with a person who uses services/practitioner *or* a small group of people who use services/practitioners – these will be supported by records of observation; the information considers, at a sound level, the skills used, the factors that supported and/or inhibited the interaction and information which shows how the values of care were applied; candidates produce a sound evaluation of the interaction which shows evidence of reflection, analysis and conclusions – this will consider the interaction from their own and the person/people who use services/practitioner(s) perspective; candidates will describe realistic improvements that could be made – there will be coherence within the work and few, if any omissions;
	3	Candidates will provide comprehensive records of **one** interaction with a person who uses services/practitioner *or* a small group of people who use services/practitioners – these will be supported by records of observation; the information considers, at a comprehensive level, the skills used, the factors that supported and/or inhibited the interaction and information which shows a high level of understanding of how the values of care were applied; candidates will produce a comprehensive evaluation of the interaction which shows evidence of reflection, analysis and conclusions – they will consider the interaction from their own and the person/people who use services/practitioner(s) perspective; candidates will describe in detail realistic improvements that could be made – there will be synthesis and originality within the work and no omissions.

Unit F912 - Assessment Evidence Grid

Unit F912: Promoting good health

What the candidate needs to do:

Candidates need to produce a report of the planning of, and their participation in, a small-scale health-promotion campaign to promote good health.
[**50 marks**].The evidence needs to include:
AO1: evidence that candidates understand the principles of health and well-being, including the factors which can affect health and well being [**15**];
AO2: applying knowledge and showing understanding of the job roles of key workers who promote health, including information about **two** preventative measures [**15**];
AO3: evidence of planning and carrying out a health promotion campaign [**10**];
AO4: evidence the impact of your health promotion campaign and your own performance [**10**].

How candidate will be assessed:

Assessment Objective	Mark Band 1	Mark Band 2	Mark Band 3	Mark Awarded
AO1	Candidates show a basic understanding of the principles of health and well-being; they produce a basic description about **two** factors that can affect health; they show a basic understanding of the medical and social models of health and the effects of ill-health on individuals' quality of life. **[0 1 2 3 4 5]**	Candidates show a sound understanding of the principles of health and well-being; they produce a sound description about **two** factors that can affect health; they show a sound understanding of the medical and social models of health and the effects of ill-health on individuals' quality of life. **[6 7 8 9 10]**	Candidates show a in-depth understanding of the principles of health and well-being; they produce a comprehensive description about **two** factors that can affect health; they show an in-depth understanding of the medical and social models of health and the effects of ill-health on individuals' quality of life. **[11 12 13 14 15]**	**/15**
AO2	Candidates provide, with guidance, a basic account of the job roles of **two** key workers who are involved in promoting health, and give a basic description of **two** preventative measures that they could apply; candidates show a basic understanding of the implications of a current health promotion initiative; Ability to communicate using some appropriate terminology. Sentences have limited coherence and structure, often being of doubtful relevance to the main focus of the AO. Errors of grammar, punctuation and spelling may be noticeable and intrusive. **[0 1 2 3 4 5]**	Candidates provide a sound level of understanding of a range of job roles of **two** key workers who are involved in promoting health, and describe thoroughly **two** preventative measures that they could apply; Candidates show a sound understanding of the implications of a current health promotion initiative; Limited ability to organise relevant material. Some appropriate terminology used. Sentences are not always relevant with material presented in a way that does not always address the AO. There may be noticeable errors of grammar, punctuation and spelling. **[6 7 8 9 10]**	Working accurately and independently, candidates provide in-depth knowledge and understanding of a range of the job roles of **two** key workers who are involved in promoting health, explaining **two** preventative measures that they could apply; Candidates show an in-depth understanding of the implications of a current health promotion initiative. Ability to present relevant material in a planned and logical sequence. Appropriate terminology used. Sentences, for the most part, relevant and presented in a balanced, logical and coherent manner which addresses the AO. There will be occasional errors of grammar, punctuation and spelling. **[11 12 13 14 15]**	**/15**

Unit F912: Promoting good health (continued)				
Assessment Objective	Mark Band 1	Mark Band 2	Mark Band 3	Mark Awarded
AO3	Candidates produce a basic plan for a small-scale health-promotion campaign and records to show how it was implemented; [0 1 2 3 4]	Candidates produce a detailed plan for a small-scale health-promotion campaign and records to show how it was implemented; [5 6 7]	Candidates produce a comprehensive plan for a small-scale health-promotion campaign and records to show how it was implemented. [8 9 10]	/10
AO4	Candidates produce a basic evaluation of the impact of the health promotion campaign, including a limited reflection on their own performance; [0 1 2 3 4]	Candidates produce a sound evaluation of the impact of the health promotion campaign, including a detailed reflection on their own performance; [5 6 7]	Candidates produce a comprehensive evaluation of the impact of the health promotion campaign, including an in-depth reflection that makes reasoned judgments about their performance; valid conclusions are drawn which accurately reflect their evaluations. [8 9 10]	/10
			Total mark awarded:	/50

Amplification of Criteria

The further guidance below amplifies the criteria in the Assessment Evidence Grid and will help to determine the appropriate mark to be awarded for each strand.

		Amplification of Criteria
AO	**Mark Band**	**Characteristics of the work one may expect to see at this mark band can be summarised as follows:**
AO1	1	Candidates will produce a basic description which shows limited understanding of health and well-being: candidates will produce a basic description that shows a basic understanding of how **two** different factors affect health and well-being; candidates will show a basic understanding of the differences between the medical and social models of health and well-being when outlining why individuals often fail to conform to health education advice; candidates will outline **two** ways in which individuals' quality of life could be affected by ill-health; there may be omissions and/or inaccuracies within the evidence;
	2	Candidates will produce a detailed description which shows a sound understanding of health and well-being; candidates will produce a sound description that shows some understanding of how **two** different factors affect health and well-being, giving a range of examples; candidates will show a sound understanding of the differences between the medical and social models of health and well-being when explaining why individuals often fail to conform to health education advice; candidates will describe in detail **two** ways in which individuals' quality of life could be affected by ill-health; there will be few omissions and/or inaccuracies within the evidence;
	3	Candidates will produced a comprehensive description which shows an in-depth understanding of health and well-being candidates will produce a comprehensive description that shows in-depth understanding of how two different factors affect health and well-being, giving a wide range of appropriate examples; candidates will show an in-depth understanding of the differences between the medical and social models of health and well-being when explaining in detail why individuals often fail to conform to health education advice; clear and accurate conclusions will be drawn about the medical and social models of health and well-being candidates will give a comprehensive description of **two** ways in which individuals' quality of life is affected by ill-health; there will be no omissions or inaccuracies within the evidence.
AO2	1	With guidance, candidate will produce a basic description of the job roles of **two** key workers who are involved in promoting health, showing a basic understanding of the tasks they perform; a basic description of **two** preventative measures the chosen key workers would apply will be included; the evidence may lack detail but candidates will show basic understanding of the reasons for the preventative measures; Candidate will show a basic understanding of the implications of current health promotion initiatives there will be omissions and/or inaccuracies within the evidence; candidate will write in a manner which is adequate to convey meaning, although it may be expressed in a non-specialist manner;

AO	Mark Band	Characteristics of the work one may expect to see at this mark band can be summarised as follows:
AO2	2	With minimal guidance, candidate will produce a detailed description of the job roles of two key workers who are involved in promoting health, showing a sound understanding of the tasks they perform; a detailed description of two preventative measures the chosen key workers would apply will be included; candidate will show a sound understanding of the reasons for the preventative measures, including government initiatives being met; candidate will show a sound understanding of the implications of current health promotion initiatives there will be few omissions and/or inaccuracies within the evidence; candidate will write in a manner which conveys meaning, using specialist vocabulary with few errors/inaccuracies;
	3	Accurately and independently, candidate will produce a comprehensive description of the job roles of two key workers who are involved in promoting health, showing an in-depth understanding of the tasks they perform; there will be justification of the skills and qualities each key worker requires to ensure the needs of the individual are met; an explanation of two preventative measures the chosen key workers would apply will be included; candidates will show an in-depth understanding of the reasons for the preventative measures being applied; candidates will show an in-depth understanding of the implications of current health promotion initiatives, candidates will work independently to produce accurate work; there will be no omissions or inaccuracies within the evidence; candidates will write in a manner which conveys appropriate meaning, using specialist vocabulary with accuracy – there will be no errors/inaccuracies.
AO3	1	Candidate collects and uses information from a limited number of information sources ; candidate will produce a basic plan outlining the approach to be used for the small-scale health-promotion campaign to be carried out; the plan will include basic pre-set criteria to be used to judge the outcomes of the campaign, e.g. aims and objectives, cost and time; an outline of the methods to be used will be given; records of assessment will show that the health-promotion campaign was carried out accurately, but with support ; the analysis is limited and is more in the form of statements than analytical judgments; there may be omissions and/or inaccuracies within the evidence;
	2	Candidate will use information from carrying out research, using both primary and secondary research, in order to plan their campaign; candidate will produce a sound plan which will relate to the small-scale health-promotion campaign to be carried out; timescales will be given which show how the main tasks are to be broken into component parts, and these will be realistic; there will be a sound explanation within the plan, giving reasons, for the pre-set criteria, including aims and objectives, intended and unintended outcomes, cost and time; the methods to be used will be explained; records of assessment will confirm observation of candidates showing competence in carrying out the health-promotion campaign independently; the analysis will be sound, showing some ability to reflect and make judgments; there will be few omissions and/or inaccuracies within the evidence;

AO	Mark Band	Characteristics of the work one may expect to see at this mark band can be summarised as follows:
AO3	3	Candidates will undertake research and use the information gathered from a wide range of information sources, using both primary and secondary research; candidates will produce a comprehensive plan which breaks each main task into smaller component parts; accurate time/scales will be given for each component to complete the health-promotion campaign; the explanations showing how and why each component will be carried out will show in-depth understanding of the processes involved in planning and carrying out a health-promotion campaign; comprehensive pre-set criteria will be included which explain the aims and objectives, intended and unintended outcomes, cost, time etc.; the methods to be used will be clearly justified; records of assessment will confirm observation of candidates demonstrating competence and confidence when carrying out the small-scale health-promotion campaign independently; the analysis is detailed, showing the ability of candidates to reflect on their findings and make reasoned judgments; there will be no omissions or inaccuracies within the evidence.
AO4	1	candidates will produce a basic evaluation of the impact of the health promotion campaign which includes information relating to the measure of the outcomes against the pre-set criteria; candidates will reflect on their own performance during the planning and implementation of the campaign in order to complete a basic evaluation of their performance; there will be evidence of reflection and basic analysis; there may be omissions and/or inaccuracies within the evidence;
AO4	2	candidates will produce a sound evaluation of the impact of the health promotion campaign which includes information relating to the success of the campaign in relation to the pre-set criteria; candidates will reflect on their own performance during the planning and implementation of the campaign in order to complete a sound evaluation of their performance, drawing conclusions and recommending possible improvements; there will be few omissions and/or inaccuracies within the evidence.
AO4	3	candidates will produce a comprehensive evaluation of the impact of the health promotion campaign which includes evidence of the success of the campaign measured against the pre-set criteria; candidates will reflect on their own performance during the planning and implementation of the campaign in order to complete a comprehensive evaluation of their own performance which shows evidence of in-depth reflection, the ability to analyse, make reasoned judgements and draw valid conclusions; reasoned judgments will be used to produce recommendations for improvements which could be made to performance; these will be valid and achievable and include clear justification for suggestions made; there will be no omissions or inaccuracies within the evidence.

Unit F914 - Assessment Evidence Grid

Unit F914: Caring for people with additional needs

What the candidate needs to do:

Candidates need to produce a guide for practitioners which explores caring for people with additional needs, using the profile of a person who uses services who has additional needs [**50 marks**]. The guide needs to include:

AO1: understanding of the causes of additional needs, the effects of additional needs on people who use services and the care management process [**15**];

AO2: a profile of a person who uses services who has additional needs. You need to show an understanding of the key roles of two individuals/practitioners who support the person who uses services including the benefits of partnership working [**15**];

AO3: research and analysis of the models or approaches used to support the person who uses services, recognising attitudes and values of society towards people with additional needs [**10**];

AO4: understanding of two possible barriers experienced, support, aids and adaptations used, evaluating their impact on the person who uses services [**10**]

How candidate will be assessed:

Assessment Objective	Mark Band 1	Mark Band 2	Mark Band 3	Mark Awarded
AO1	Candidates show a basic understanding of **three** causes of additional needs, giving a basic description of the effects on people who use services; show a basic level of understanding of each stage of the care-management process **[0 1 2 3 4 5]**	candidates show a sound understanding of **three** causes of additional needs, giving a sound description of the effects on people who use services; show a sound understanding of each stage of the care-management process **[6 7 8 9 10]**	candidates show an in-depth understanding of **three** causes of additional needs, giving a comprehensive explanation of the effects on people who use services. accurately and independently show an in-depth understanding of each stage of the care-management process　　**[11 12 13 14 15]**	**/15**
AO2	Candidates produce a basic profile of a person who uses services who has additional needs; with guidance, describe the key roles of **two** individuals/practitioners who support the person who uses services; briefly outline how partnership working benefits people who use services/practitioners; Ability to communicate using some appropriate terminology. Sentences have limited coherence and structure, often being of doubtful relevance to the main focus of the AO. Errors of grammar, punctuation and spelling may be noticeable and intrusive. **[0 1 2 3 4 5]**	candidates produce a detailed profile of a person who uses services who has additional needs; describe in detail the key roles of **two** individuals/practitioners who support the person who uses services; outline how partnership working benefits people who use services/practitioners; Limited ability to organise relevant material. Some appropriate terminology used. Sentences are not always relevant with material presented in a way that does not always address the AO. There may be noticeable errors of grammar, punctuation and spelling.　　**[6 7 8 9 10]**	candidates produce a comprehensive profile of a person who uses services who has additional needs; explain the key roles of **two** individuals/practitioners who support the person who uses services; describe in detail how partnership working benefits people who use services/practitioners; Ability to present relevant material in a planned and logical sequence. Appropriate terminology used. Sentences, for the most part, relevant and presented in a balanced, logical and coherent manner which addresses the AO. There will be occasional errors of grammar, punctuation and spelling **[11 12 13 14 15]**	**/15**

Unit F914: Caring for people with additional needs (continued)				
Assessment Objective	Mark Band 1	Mark Band 2	Mark Band 3	Mark Awarded
AO3	Candidates use limited information sources to collect evidence of how the medical and social models would interpret the additional needs of the person who uses services, analysing at a basic level the attitudes and values of society towards people who use services with additional needs; **[0 1 2 3 4]**	candidates use a range of information sources to research how the medical and social models would interpret the additional needs of the person who uses services, producing a sound analysis of the attitudes and values of society towards people with additional needs; **[5 6 7]**	candidates obtain information from a wide range of information sources to explore how the medical and social models would interpret the additional needs of the person who uses services, producing a comprehensive analysis of the attitudes and values of society towards people with additional needs **[8 9 10]**	**/10**
AO4	Candidates describe at a basic level **two** possible barriers experienced, methods of support, aids and equipment used and include a basic evaluation of their impact on the person who uses services; **[0 1 2 3 4]**	candidates give a sound description of **two** possible barriers experienced, methods of support, aids and equipment used and include a sound evaluation of their impact on the person who uses services; **[5 6 7]**	candidates give a comprehensive description of **two** possible barriers experienced, methods of support, aids and equipment used and includes a comprehensive evaluation of their impact on the person who uses services. **[8 9 10]**	**/10**
			Total mark awarded:	**/50**

Amplification of Criteria

The further guidance below amplifies the criteria in the Assessment Evidence Grid and will help to determine the appropriate mark to be awarded for each strand.

AO	Mark Band	Characteristics of the work one may expect to see at this mark band can be summarised as follows:
AO1	1	Candidates produce a limited outline showing a basic understanding of **three** causes of additional needs of people who use services; Candidates give a basic description of the effects on people who use services covering aspects of PIES and may include some inaccuracies and omissions; with guidance, candidates will give a basic explanation of each stage of the care-management process; a basic description of the methods used to assess, plan, implement, monitor and evaluate/review individual care/learning plans, including reference to PIES at a basic level; there may be omissions and/or inaccuracies within the evidence;
	2	Candidates produce a detailed outline showing a sound understanding of **three** causes of additional needs for people who use services; candidates give a sound description of the effects of the additional needs have on people who use services covering all aspects of PIES; candidates will produce a detailed explanation of each stage of the care-management process; candidates will produce a sound description of the methods used to assess, plan, implement, monitor and evaluate/review individual care/learning plans, including reference to all aspects of PIES, at a sound level; there will be few omissions and/or inaccuracies within the evidence;
	3	Candidates will produced a comprehensive description to show in-depth understanding of **three** causes of additional needs for people who use services; the description will be detailed and will show an in-depth understanding of the additional needs of the person who uses services, giving a comprehensive explanation of the short and long-term effects covering all aspects of PIES; clear and accurate conclusions will be drawn; candidates will produce and in-depth account, showing an in-depth understanding of each stage of the care-management process; there will be a comprehensive description of different methods used to assess, plan, implement, monitor and evaluate/review individual care/learning plans, including a comprehensive description of all aspects of PIES; candidates will also demonstrate an in-depth understanding of how evaluation procedures followed lead to the modification of individual plans to ensure the changing needs of people who use services are met; there will be no omissions or inaccuracies within the evidence.
AO2	1	Candidate will give a basic description about the additional needs of a person who uses services, including the causes and effects; when giving a basic description of the roles of **two** individuals/practitioners who support the person who uses services, they will choose **one** that meets the physical needs, e.g. a physiotherapist, and another that meets social or emotional needs, e.g. a counsellor; candidate will give a basic outline the differences in the skills and qualities of each to ensure the needs of the person who uses services are met; candidate will show a basic understanding of the tasks they perform; there will be a basic outline of how partnership working benefits people who use services and practitioners there may be significant omissions; candidate will write in a manner which is adequate to convey meaning, although it will be expressed in a non-specialist manner;

AO	Mark Band	Characteristics of the work one may expect to see at this mark band can be summarised as follows:
AO2	2	Candidate will give a detailed description about the additional needs of a person who uses services, including the causes and effects; when giving a detailed description of the roles of **two** individuals/practitioners who support the person who uses services, they will choose **one** that meets the physical needs, e.g. a physiotherapist, and another that meets social or emotional needs, e.g. a counsellor; candidate will give a detailed outline of the differences in the skills and qualities of each to ensure the needs of the person who uses services are met candidate will show a sound understanding of the tasks they perform; there will be a detailed outline of how partnership working benefits people who use services and practitioners; candidate will write in a manner which conveys meaning, using specialist vocabulary with few errors/inaccuracies;
	3	Candidate will give a comprehensive description about the additional needs of a person who uses services, including the causes and effects; when explaining the roles of **two** individuals/practitioners, candidates will choose one that meets the physical needs, e.g. a physiotherapist, and another that meets social or emotional needs, e.g. a counsellor; candidate will describe in detail the differences in the skills and qualities of each to ensure the needs of the person who uses services are met candidate will show an in-depth understanding of the tasks they perform; there will be a comprehensive description of how partnership working benefits people who use services and practitioners; candidate will write in a manner which conveys appropriate meaning, using specialist vocabulary with accuracy – there will be no errors/inaccuracies.
AO3	1	Candidate collects and uses limited sources of information, for example, through questionnaires, interview questions or from secondary sources; Candidate will produce a basic description that shows a basic understanding of how both the medical and social models of disability would interpret the person who uses services' additional needs; candidate will give a basic analysis of the ways in which the person who uses services' quality of life has been affected by the attitudes and values of society; the analysis is limited and is more in the form of statements than analytical judgements, and may include some inaccuracies and omissions;
	2	Candidates use a range of information sources to carry out both primary and secondary research, for example, through questionnaires, interview questions, and secondary sources e.g. the internet, books; Candidate will produce a factual description that shows a sound understanding of how both the medical and social models of disability would interpret the person who uses services' additional needs; candidates will draw conclusions to give a sound explanation of why the differences in interpretation would provide different support for the person who uses services; candidate will give a sound analysis of the ways in which the person who uses services' quality of life has been affected by the attitudes and values of society; the analysis will show the ability to reflect and to make reasoned judgements in detail; there may be a few errors/inaccuracies;

AO	Mark Band	Characteristics of the work one may expect to see at this mark band can be summarised as follows:
AO3	3	Candidate carries out research using a wide range of both primary, for example, through questionnaires, interview questions, and secondary sources e.g. the internet, books; Candidate will produce a comprehensive description that shows an in-depth understanding of how both the medical and social models of disability would interpret the person who uses services' additional needs; candidates will draw conclusions to explain in detail why the differences in interpretation would provide different support for the person who uses services; candidate will give a comprehensive analysis of the ways in which the person who uses services' quality of life has been affected, both positively and negatively, by the attitudes and values of society; the analysis is detailed and shows the ability of candidates to reflect on their findings and make reasoned judgements, there will be no errors/inaccuracies.
AO4	1	Candidates describe at a basic level **two** possible barriers the person who uses services could experience; candidate will show a basic understanding of how the barriers restrict the person who uses services, with little information given about limitations of opportunities to participate fully in the social and economic life of their community; candidate will give a basic description of methods of support, aids and equipment used by the person who uses services; the evaluation of their impact on the person who uses services will be basic and show basic understanding; there will be inaccuracies and/or omissions;
AO4	2	Candidates give a sound description of **two** possible barriers the person who uses services could experience; candidate will show a sound understanding of how the barriers restrict the person who uses services, with clear information given about limitations of opportunities to participate fully in the social and economic life of their community; candidate will give a sound description of a range of methods of support, aids and equipment used by the person who uses services; the evaluation of their impact on the person who uses services will be sound and show a sound level of understanding; there will be a few inaccuracies and/or omissions;
AO4	3	Candidates comprehensively describe **two** possible barriers the person who uses services could experience; candidate will show an in-depth understanding of how the barriers restrict the person who uses services, with detailed analysis of the limitations of opportunities to participate fully in the social and economic life of their community; candidates will thoroughly describe a range of methods of support, aids and equipment used by the person who uses services; the evaluation of their impact on the person who uses services will make reasoned judgments and show a comprehensive level of understanding of both positive and negative factors; there will be no inaccuracies or omissions.

Unit F915 - Assessment Evidence Grid

Unit F915: Working in early-years care and education

What candidates need to do:

Candidates need to produce a guide for early-years care and education provision in the local area and explore the different ways in which children learn [**50 marks**].

The evidence needs to include:

AO1: information about different early-years care and education services that are available in the local area, including the influences of **one** national policy [**15**];

AO2: a description of job roles and responsibilities of practitioners in early-years services and an exploration of how they apply the values of care in their day-to-day tasks [**15**]

AO3: information about the ways children in the care setting learn and develop, recognising factors that affect the children's learning and performance [**10**];

AO4: a learning plan produced and implemented for an activity to use in the early-years setting and an evaluation of the benefits to the child/children, including recommendations for improvement [**10**].

How candidate will be assessed:

Assessment Objective	Mark Band 1	Mark Band 2	Mark Band 3	Mark
AO1	Candidates demonstrate a basic understanding of different types of early-years provision to include **two** private, **two** statutory, **two** voluntary and **two** informal groups in the local area, and identify the main purposes of each provision. A basic understanding of the influences of **one** national policy will be shown; **[0 1 2 3 4 5]**	candidates demonstrate a sound understanding of different types of early-years provision to include **two** private, **two** statutory, **two** voluntary and **two** informal groups in the local area, and describe the main purposes of each provision. A sound understanding of the influences of **one** national policy will be shown; **[6 7 8 9 10]**	candidates demonstrate a comprehensive understanding of different types of early-years provision to include **two** private, **two** statutory, **two** voluntary and **two** informal groups in the local area, and explain the main purposes of each provision. An in-depth understanding of the influences of **one** national policy will be shown. **[11 12 13 14 15]**	**/15**
AO2	Candidates provide, with guidance, basic information about **two** job roles in the early-years sector and the skills and qualifications required, describing day-to-day tasks and how the values of care are applied; Ability to communicate using some appropriate terminology. Sentences have limited coherence and structure, often being of doubtful relevance to the main focus of the AO. Errors of grammar, punctuation and spelling may be noticeable and intrusive. **[0 1 2 3 4 5]**	candidates show a sound understanding of **two** job roles in the early-years sector and the skills and qualifications required, describing in detail day-to-day tasks and how the values of care are applied; Limited ability to organise relevant material. Some appropriate terminology used. Sentences are not always relevant with material presented in a way that does not always address the AO. There may be noticeable errors of grammar, punctuation and spelling. **[6 7 8 9 10]**	candidates demonstrate, accurately and independently, an in-depth understanding when providing information about **two** job roles in the early-years sector and the skills and qualifications required, explaining, with examples, how the values of care are applied; Ability to present relevant material in a planned and logical sequence. Appropriate terminology used. Sentences, for the most part, relevant and presented in a balanced, logical and coherent manner which addresses the AO. There will be occasional errors of grammar, punctuation and spelling **[11 12 13 14 15]**	**/15**

Unit F915: Working in early-years care and education (continued)				
Assessment Objective	Mark Band 1	Mark Band 2	Mark Band 3	Mark
AO3	Candidates collect information to describe, at a basic level, factors (**one** from each of the **four** main groups) that affect learning and development, candidates complete a basic analysis of **two** strategies that aid learning; **[0 1 2 3 4]**	candidates undertake research, from a range of information sources, to describe in detail the factors (**one** from each of the **four** main groups) that affect learning and development, candidates complete a sound analysis of **two** strategies that can aid learning; **[5 6 7]**	candidates undertake research, from a wide range of sources, to give a comprehensive explanation of the factors (**one** from each of the **four** main groups) that affect learning and development, candidates complete a comprehensive analysis of **two** strategies that can aid learning. **[8 9 10]**	/10
AO4	Candidates produce a basic plan and implement an activity for a child/children in an early-years setting to encourage learning and development, including a basic evaluation of the benefits of the activity to the child, and making recommendations for improvement; **[0 1 2 3 4]**	candidates produce a detailed plan and implement an activity for a child/children in an early-years setting to encourage learning and development, including a sound evaluation of the benefits of the activity to the child, and making recommendations for improvement; **[5 6 7]**	candidates produce a comprehensive plan and implement an activity for child/children in an early-years setting to encourage learning and development, providing a comprehensive evaluation of the benefits of the activity to the child, and making realistic recommendations for improvement. **[8 9 10]**	/10
Total mark awarded:				/50

Amplification of Criteria

The further guidance below amplifies the criteria in the Assessment Evidence Grid and will help to determine the appropriate mark to be awarded for each strand.

AO	Mark Band	Characteristics of the work one may expect to see at this mark band can be summarised as follows:
AO1	**1**	Candidates will give a basic description of the different types of early-years provision available in the local area, e.g. childminders, pre-schools and after-school clubs; they will include **two** examples from each of private, statutory, voluntary and informal groups; they will give a basic outline of the main purposes of each, including basic information about the influences of **one** national policy on **one** of the examples chosen; the evidence may lack detail and will contain some omissions and/or inaccuracies;
	2	Candidates will give a sound description of the different types of early-years provision available in the local area, e.g. childminders, pre-schools and after-school clubs, parent-and-toddler groups; they will give a sound description of **two** examples from each of private, statutory, voluntary and informal groups; they will give a sound description of the main purposes of each, showing a sound level of understanding of the influences of **one** national policy on **one** of the examples chosen; there will be few omissions and/or inaccuracies;
	3	Candidates will give a comprehensive description of the different types of early-years provision available in the local area, e.g. childminders, pre-schools and after-school clubs, parent-and-toddler groups and primary schools; they will explain **two** examples from each of private, statutory, voluntary and informal groups; they will explain the main purposes of each, showing an in-depth understanding of the influences of **one** national policy on **one** of the examples chosen; there will be no omissions or inaccuracies within the evidence.
AO2	**1**	Candidate will provide a basic description about **two** different job roles in **the early years** sector, e.g. they will state **three** main features of each role; the information will cover the basic tasks that are carried out by each on a day-to-day basis; the qualifications required will be accurate and **three** skills that are required to carry out the role will be outlined; when considering the early-years' values of care, they will be described at a basic level, with examples of how each could be applied by both practitioners; there may be some omissions and/or inaccuracies within the evidence; candidate will write in a manner which is adequate to convey meaning, although it will be expressed in a non-specialist manner;

AO	Mark Band	Characteristics of the work one may expect to see at this mark band can be summarised as follows:
AO2	2	Candidates will provide a sound description of **two** different job roles in the early years sector, e.g. they will describe **three** main features of each role, giving details of what these involve; there will be a sound description of the tasks that are carried out by each on a day-to-day basis; the qualifications required will be accurate and **three** skills that are required to carry out the role will be described, with appropriate examples; when considering the early-years' values of care, they will be accurately described, in detail, with examples of how each could be applied by both practitioners; there will be few omissions and/or inaccuracies within the evidence; candidates will write in a manner which conveys meaning, using specialist vocabulary with few errors/inaccuracies;
	3	Candidates will provide a comprehensive explanation about **two** different job roles in the early years sector, e.g. they will explain **three** main features of each role, giving details of what these involve; the information will give a comprehensive explanation of the tasks that are carried out by each on a day-to-day basis; a comprehensive explanation of the day plan will be included; the qualifications required will be accurate and alternative qualifications will be included; **three** skills that are required to carry out the role will be explained with a range of appropriate examples; when considering the early-years' values of care, they will be explained, with a range of appropriate examples of how each could be applied by both practitioners; there will be no omissions or inaccuracies within the evidence; candidates will write in a manner which conveys appropriate meaning, using specialist vocabulary with accuracy – there will be no errors/inaccuracies.
AO3	1	Candidate's evidence will show that a limited range of sources has been used for research, e.g. books and the Internet; the information will be at a basic level, with basic descriptions of how factors can affect learning and development; **one** factor from each of the **four** main groups will be described at a basic level, i.e. **one** social, **one** economic, **one** environmental and **one** physical factor; candidate will give a basic analysis of **two** strategies that can be used to aid learning; candidate will show a limited ability to include relevant and accurate factual information; there may be omissions and/or inaccuracies within the evidence;
	2	Candidate's evidence will show that a range of sources has been used for research, e.g. books, people and the Internet; the information will be detailed, with a detailed description showing a sound level of understanding of how the factors can affect development, e.g. an economic factor could be given, such as the family having sufficient income to allow their child to attend a play group twice each week, which could affect the child's development as their language skills could be improved through interacting with a range of people; there will be a sound explanation of **one** factor from each of the **four** main groups, i.e. **one** social, **one** economic, **one** environmental and **one** physical factor; candidate will give a sound analysis, showing a sound level of understanding, of **two** strategies that could be used to aid learning; there will be few omissions and/or inaccuracies within the evidence;

AO	Mark Band	Characteristics of the work one may expect to see at this mark band can be summarised as follows:
AO3	3	Candidate's evidence will show that a wide range of appropriate sources has been used for research, e.g. books, magazines, people and the Internet; a record of the resources used will be kept; the information about factors will be comprehensive, with a comprehensive explanation showing a high level of understanding of how the factors can affect development, e.g. an economic factor could be given, such as the family having sufficient income to allow their child to attend a play group twice each week, which could affect the child's development as their language skills could be improved through interacting with a range of people, and also the child's social skills could be improved as they have the opportunity to observe and learn from others; there will be a comprehensive explanation of **one** factor from each of the **four** main groups, i.e. **one** social, **one** economic, **one** environmental and **one** physical factor; candidate will give a comprehensive analysis of **two** strategies that could be used to aid learning; there will be no omissions or inaccuracies within the evidence.
AO4	1	Candidate will have chosen a simple activity to do with a child/children that lasts for about **ten** minutes, e.g. a picture that needs colouring with the correct colours; the plan will give limited information on the impact on the child, methods to be used, and will outline timescales which may not be realistic; the evaluation will be basic and show limited ability to analyse, but will include some basic recommendations for improvements; candidates attempt to draw valid conclusions about the impact of the activity on the child's/children's development. there will be omissions and/or inaccuracies within the evidence;
	2	Candidate will have chosen an activity to do with a child/children that shows thought about the impact on the child's/children's development; the activity will last for about **ten** minutes but could be longer, e.g. a matching exercise that has more than **one** stage involved in the process; the plan will give detailed information on the impact on the child, the methods to be used, and timescales for the stages which are accurate describing how the implementation is to be achieved; the evaluation will be sound and show ability to reflect on performance, to analyse by considering, in some detail, the component parts and to make informed judgements, and will include some sound and realistic recommendations for improvements; candidates draw some valid conclusions about the impact of the activity on the child/children's development. there will be few omissions and/or inaccuracies within the evidence;
	3	Candidates will have chosen an activity to do with a child/children that lasts for about **ten** minutes but could be longer, e.g. improving hand-eye co-ordination and learning new vocabulary; the plan will give comprehensive information about the impact on the child, that shows thought about whether the activity is sufficiently challenging for the child/children; explaining the methods to be used, and timescales for the stages which are accurate, showing how the implementation is to be achieved; reasons will be given for most of the actions taken; the evaluation will be comprehensive show ability to reflect on performance, to analyse by considering in depth the component parts and to make reasoned judgements, and will include the ability to make realistic and thoughtful recommendations for improvements; candidates draw valid conclusions about the impact of the activity on the child's/children's development. there will be no omissions or inaccuracies within the evidence.

Unit F916 - Assessment Evidence Grid

Unit F916: Health as a lifestyle choice

What the candidate needs to do:

Candidate needs to produce a report which explores healthy-lifestyle choices, devising an exercise programme for **one** individual [**50 marks**].
Evidence needs to include**:**

AO1: understanding of the positive effects of exercise on the physical, mental and social health of individuals [**15**];

AO2: understanding of the diet of the individual, making recommendations for improvements based on current dietary guidelines [**15**];

AO3: relevant research and analysis when planning and designing an exercise programme for the individual [**10**];

AO4: monitoring and evaluation of the likely success and effectiveness of the diet recommendations and exercise programme on the individual [**10**].

How candidates will be assessed:

Assessment Objective	Mark Band 1	Mark Band 2	Mark Band 3	Mark
AO1	Candidate shows a basic knowledge and understanding of the positive effects of exercise on the physical, mental and social health of individuals; **[0 1 2 3 4 5]**	candidate demonstrates a sound knowledge and understanding of the positive effects of exercise on the physical, mental and social health of individuals; **[6 7 8 9 10]**	candidate demonstrates comprehensive knowledge and understanding of the positive effects of exercise on the physical, mental and social health of individuals. **[11 12 13 14 15]**	**/15**
AO2	Candidates show, with guidance, a basic understanding of the nutritional content of food, the dietary function of both macro- and micro-nutrients and the dietary needs of the individual, making basic recommendations for improvements based on current dietary guidelines; Ability to communicate using some appropriate terminology. Sentences have limited coherence and structure, often being of doubtful relevance to the main focus of the AO. Errors of grammar, punctuation and spelling may be noticeable and intrusive **[0 1 2 3 4 5]**	candidates show a sound understanding of the nutritional content of food, the dietary function of both macro- and micro-nutrients and the dietary needs of the individual, making sound recommendations for improvements based on current dietary guidelines; Limited ability to organise relevant material. Some appropriate terminology used. Sentences are not always relevant with material presented in a way that does not always address the AO. There may be noticeable errors of grammar, punctuation and spelling. **[6 7 8 910]**	candidates show, accurately and independently, an in-depth understanding of the nutritional content of food, the dietary function of both macro- and micro-nutrients and the dietary needs of the individual, making comprehensive recommendations for improvements based on current dietary guidelines; Ability to present relevant material in a planned and logical sequence. Appropriate terminology used. Sentences, for the most part, relevant and presented in a balanced, logical and coherent manner which addresses the AO. There will be occasional errors of grammar, punctuation and spelling. **[11 12 13 14 15]**	**/15**
AO3	Candidates use limited information sources to plan and design a **basic** exercise programme (to include **two** types of exercise and an investigation of the individual's lifestyle and needs), applying basic analytical skills to show how the programme meets the needs of the individual; **[0 1 2 3 4]**	candidates use a range of relevant information sources to plan and design a detailed exercise programme (to include **two** types of exercise and an investigation of the individual's lifestyle and needs), applying sound analytical skills to describe how the programme meets the needs of the individual; **[5 6 7]**	candidates undertake research using a wide range of relevant information sources to plan and design a comprehensive exercise programme (to include **two** types of exercise and an investigation of the individual's lifestyle and needs), applying comprehensive analytical skills to show how the plan meets the needs of the individual. **[8 9 10]**	**/10**

Assessment Objective	Mark Band 1	Mark Band 2	Mark Band 3	Mark
Unit F916: Health as a lifestyle choice (continued)				
AO4	Candidates carry out a basic evaluation of the evidence collected during monitoring, drawing basic conclusions as to the likely success and effectiveness of the diet recommendations and exercise programme on the individual; **[0 1 2 3 4]**	candidates carry out a sound evaluation of the evidence collected during monitoring to draw some valid conclusions as to the likely success and effectiveness of the diet recommendations and exercise programme on the individual; **[5 6 7]**	candidates carry out a comprehensive evaluation of the evidence collected during monitoring to draw valid and detailed conclusions as to the likely success and effectiveness of the diet recommendations and exercise programme on the individual. **[8 9 10]**	**/10**
			Total mark awarded:	**/50**

GCE Health and Social Care September 2013

Amplification of Criteria

The further guidance below amplifies the criteria in the Assessment Evidence Grid and will help to determine the appropriate mark to be awarded for each strand.

		Amplification of Criteria
AO	**Mark Band**	**Characteristics of the work one may expect to see at this mark band can be summarised as follows:**
AO1	**1**	Candidates will produce an outline, showing a basic understanding of the positive effects of exercise on individuals' physical, mental and social health; diagrams will be included to show physical effects; candidates will produce an outline to show a basic understanding of how exercise can be integrated into everyday life; the evidence may contain limited effects on individuals daily living and may contain some omissions and/or inaccuracies;
	2	Candidates will produce a sound description showing a sound level of understanding of the positive effects of exercise on individuals' physical, mental and social health; diagrams will be used and annotated to show more in-depth knowledge of physical effects; candidates will give a sound description to show a sound level of understanding of how exercise can be integrated into everyday life; the evidence will contain a sound description of effects on individuals daily living and there will be few omissions and/or inaccuracies within the evidence;
	3	Candidates will produce a comprehensive description when demonstrating their in-depth understanding of the effects of exercise on individuals' physical, mental and social health; diagrams will be used and supported by an in-depth knowledge and understanding of physical effects; candidates will provide a comprehensive description to show in-depth understanding of how exercise can be integrated into everyday life; clear and accurate conclusions will be drawn relating to the effects on daily living; evidence shows an in-depth level of understanding and there will be no omissions or inaccuracies within the evidence.
AO2	**1**	Candidates will give a limited explanation to show a basic understanding of the nature and dietary function of macro- and micro-nutrients; there will be a basic description of foods that provide the main sources of each nutrient; candidates' understanding of the essential roles of water and non-starch polysaccharide (NSP/dietary fibre) will be limited; candidates will describe at a basic level the dietary needs for the individual; there may be little, if any, consideration of diverse backgrounds or specific dietary variation where modification of the diet will be necessary; recommendations for improvements will be realistic but lacking detail; the evidence may be limited and may contain omissions and/or inaccuracies; candidates will write in a manner which is adequate to convey meaning, although it will be expressed in a non-specialist manner;

AO	Mark Band	Characteristics of the work one may expect to see at this mark band can be summarised as follows:
AO2	2	Candidates will give a detailed explanation to show a sound level of understanding of the nature and dietary function of macro- and micro-nutrients; candidates will include a detailed description of foods that provide the main sources of each nutrient; the essential roles of water and non-starch polysaccharide (NSP/dietary fibre) will be clearly described; candidates will describe in detail the dietary needs for the individual; recommendations for improvements will be detailed, showing a sound understanding of the needs of the individual and realistic changes which could be made; candidates will attempt to consider diverse backgrounds or specific dietary variation where modification of the diet will be necessary; candidates will attempt to justify their recommendations; the evidence will show some understanding and contain few minor omissions and/or inaccuracies; candidates will write in a manner which conveys meaning, using specialist vocabulary with few errors/inaccuracies;
	3	Candidates' will give a comprehensive explanation to demonstrate an in-depth understanding of the nature and dietary function of all macro- and micro-nutrients; candidates will include a detailed analysis of foods that provide the main sources of each nutrient; the essential roles of water and non-starch polysaccharide (NSP/dietary fibre) will be clearly explained; candidates will give a comprehensive explanation of the dietary needs for the individual; recommendations for improvements will be thorough, showing an in-depth understanding of the needs of the individual and realistic changes which could be made; candidates will make explicit reference to diverse backgrounds or specific dietary variation where modification of the diet will be necessary; justification for recommendations will be detailed; the evidence will show synthesis and an in-depth understanding; there will be no omissions and/or inaccuracies within the evidence; candidates will write in a manner which conveys appropriate meaning, using specialist vocabulary with accuracy – there will be no errors/inaccuracies.
AO3	1	Candidates' evidence will show that a limited range of sources has been used for research, e.g. books and the Internet; candidates will select an appropriate individual and devise a basic exercise programme; there will be an outline of the types of exercise, to include two of the following – continuous, interval, fartlek and weight training; candidates will show limited evidence of the programme being devised specifically for the individual, e.g. aims, available time, lifestyle and needs etc.; an advice sheet on safety factors to be considered whilst exercising will show basic understanding and the evidence will lack detail; a basic warm-up and cool-down will show basic understanding of physiological benefits; the programme may lack understanding and detail; there may be omissions and/or inaccuracies within the evidence;

AO3	**2**	Candidates' evidence will show that a range of sources has been used for research, e.g. books, magazines and the Internet; candidates will select an appropriate individual and devise a sound exercise programme; candidates will include detailed information in the exercise programme on types of training, to include two of the following – continuous, interval, fartlek and weight training; candidates will show sound evidence of the programme being devised specifically for the individual, taking into consideration the aims, available time, lifestyle and needs etc.; an advice sheet on safety factors to be considered whilst exercising will show sound understanding and the evidence will use a variety of sources; a warm-up and cool-down will show sound understanding of physiological benefits; candidates will give sound details of a warm-up and cool-down programme and mobility and stretching exercises of all major joints and muscles, with labelled diagrams to support descriptions; there may be few omissions and/or inaccuracies within the evidence;
	3	Candidates' evidence will show that a wide range of appropriate sources has been used for research, e.g. books, people and the Internet; candidates will select an appropriate individual and devise a comprehensive exercise programme; candidates will include comprehensive and considered information in the exercise programme; on types of training, to include two of the following – continuous, interval, fartlek and weight training; candidates will show comprehensive evidence of the programme being devised specifically for the individual, taking into careful consideration the aims, available time, lifestyle and needs etc.; an advice sheet on safety factors to be considered whilst exercising will show comprehensive understanding and the evidence will use a variety of appropriate and relevant sources; a warm-up and cool-down will show comprehensive understanding of physiological benefits; candidates will give comprehensive details of a warm-up and cool-down programme and mobility and stretching exercises of all major joints and muscles, with labelled diagrams to support descriptions; there may be few omissions and/or inaccuracies within the evidence;
AO4	**1**	Candidates will complete a basic evaluation of the likely effects of the diet recommendations; they will draw basic conclusions that will involve reflection and basic analysis as to the effectiveness of the diet plan the analysis will include information relating to the benefits to the individual with reference to the effects on physical health in the long-term, but this may lack detail; candidates will complete a basic evaluation of the likely effects of the exercise programme; they will draw basic conclusions that will involve reflection and limited analysis as to the effectiveness of the exercise programme the analysis will include information relating to the benefits to the individual with reference to the effects on physical health in the long-term, but this may lack detail; the analysis is limited and more in the form of statements than analytical judgement; there may be omissions and/or inaccuracies within the evidence;

AO4	**2**	Candidates will complete a sound evaluation of the likely effects of the diet recommendations; they will draw sound conclusions as to the effectiveness of the diet plan, the analysis will be sound and include information relating to the benefits to the individual, with reference to positive effects on their physical health in the long-term; they will draw some valid conclusions when reflecting on how they would change the plan if they were devising it again; candidates will complete a sound evaluation of the likely effects of the exercise programme; they will draw sound conclusions as to the effectiveness of the exercise programme, the analysis will be sound and include information relating to the benefits to the individual, with reference to positive effects on their physical health in the long-term; they will draw some valid conclusions when reflecting on how they would change the programme if they were devising it again; the analysis will show the ability to reflect and to make reasonable judgements in some detail; there may be few omissions and/or inaccuracies within the evidence;
	3	Candidates will produce a comprehensive evaluation, forming reasoned judgements and showing a in-depth understanding of the likely effects of the diet recommendations, as evidenced in a detailed account; they will draw detailed and accurate conclusions as to the effectiveness of the diet plan, the analysis will be comprehensive and include information relating to the benefits to the individual, with reference to positive effects on their physical health in the long-term; they will draw valid and detailed conclusions when reflecting on how they would change the diet plan if they were devising it again; candidates will produce a comprehensive evaluation, forming reasoned judgements and showing in-depth understanding of the likely effects of the exercise programme, as evidenced in a detailed account; they will draw detailed and accurate conclusions as to the effectiveness of the exercise programme, the analysis will be comprehensive and include information relating to the benefits to the individual, with reference to positive effects on their physical health in the long-term; they will draw valid and detailed conclusions when reflecting on how they would change the exercise programme if they were devising it again. they will offer comprehensive advice to the individual for the future; the analysis is detailed and shows candidates' ability to reflect and make reasoned judgements; there will be no omissions or inaccuracies within the evidence.

Unit F917 - Assessment Evidence Grid

Unit F917: Complementary therapies
What the candidate needs to do:
Candidate needs to produce a report into the use of complementary therapies, **one** of which is used by a person who uses services [**50** marks]. Evidence needs to include**:** **AO1:** understanding of the categories of complementary therapies, including their development and purpose [**15**]; **AO2:** understanding of why **two** complementary therapies are suitable for the person who uses services, describing the role of the practitioners [**15**]; **AO3:** relevant research and analysis on the value of the complementary therapy used by the person who uses services to determine the views of members of the public and healthcare practitioners [**10**]; **AO4:** an evaluation of how well the person who uses services has had their needs met by the complementary therapy and orthodox medicine [**10**].
How candidates will be assessed:

Assessment Objective	Mark Band 1	Mark Band 2	Mark Band 3	Mark Awarded
AO1	Candidates produce a basic overview of the categories of complementary therapies, including their development and purpose; **[0 1 2 3 4 5]**	candidates produce a detailed overview of the categories of complementary therapies including their development and purpose; **[6 7 8 9 10]**	candidates produce a comprehensive overview of the categories of complementary therapies, including their development and purpose. **[11 12 13 14 15]**	**/15**
AO2	Candidate applies, with guidance, knowledge and understanding to determine the suitability of **two** complementary therapies for the person who uses services and to describe the role of the practitioners; Ability to communicate using some appropriate terminology. Sentences have limited coherence and structure, often being of doubtful relevance to the main focus of the AO. Errors of grammar, punctuation and spelling may be noticeable and intrusive; **[0 1 2 3 4 5]**	candidate applies knowledge and understanding accurately, to determine the suitability of **two** complementary therapies for the person who uses services and to describe the role of practitioners; Limited ability to organise relevant material. Some appropriate terminology used. Sentences are not always relevant with material presented in a way that does not always address the AO. There may be noticeable errors of grammar, punctuation and spelling. **[6 7 8 9 10]**	candidate accurately and independently applies in-depth knowledge and understanding to determine the suitability of **two** complementary therapies for the person who uses services and to describe the role of practitioners. Ability to present relevant material in a planned and logical sequence. Appropriate terminology used. Sentences, for the most part, relevant and presented in a balanced, logical and coherent manner which addresses the AO. There will be occasional errors of grammar, punctuation and spelling. **[11 12 13 14 15]**	**/15**
AO3	Candidate collects information from limited sources, to provide a straightforward analysis of the views of the public and healthcare practitioners on the value of a complementary therapy; **[0 1 2 3 4]**	candidate undertakes research, using a range of sources, to provide an analysis of the views of the public and healthcare practitioners on the value of a complementary therapy; **[5 6 7]**	candidate undertakes research, using a wide range of appropriate sources, to provide a comprehensive analysis of the views of the public and healthcare practitioners on the value of a complementary therapy. **[8 9 10]**	**/10**

Unit F917: Complementary therapies (continued)				
How candidates will be assessed:				
Assessment Objective	Mark Band 1	Mark Band 2	Mark Band 3	Mark Awarded
AO4	Candidates carry out a basic evaluation, drawing limited conclusions of how well the person who uses service's needs have been met; **[0 1 2 3 4]**	candidates carry out a sound evaluation, drawing some valid conclusions of how the person who uses service's needs have been met; **[5 6 7]**	candidates carry out a comprehensive evaluation, drawing and justifying valid conclusions of how well the person who uses service's needs have been met. **[8 9 10]**	/10
			Total mark awarded:	/50

Amplification of Criteria

The further guidance below amplifies the criteria in the Assessment Evidence Grid and will help to determine the appropriate mark to be awarded for each strand.

		Amplification of Criteria
AO	**Mark Band**	**Characteristics of the work one may expect to see at this mark band can be summarised as follows:**
AO1	**1**	Candidates demonstrate a basic knowledge of each of the five categories of complementary therapies; there will be a brief outline of the development and purpose of each category; within each category, the candidate will identify **one** complementary therapy and give a basic explanation of where it is used and how it works alongside orthodox medicine - it is recommended that at least **one** of these will be the complementary therapy that the person who uses services is receiving; the evidence may contain significant omissions; each complementary therapy is likely to be treated separately with little synthesis; some technical language may be used; there may be some omissions and/or inaccuracies;
	2	Candidates demonstrate a sound knowledge of each of the five categories of complementary therapies; there will be an outline of the development and purpose of each category; within each category, the candidate will identify **one** complementary therapy and give a sound explanation of where it is used and how it works alongside orthodox medicine- it is recommended that at least **one** of these will be the complementary therapy that the person who uses services is receiving; candidates show the similarities and differences in the complementary therapies; the work shows some evidence of synthesis; the work-related areas will have accuracy and mainly correct use of technical terminology;
	3	Candidates demonstrate comprehensive knowledge of each of the five categories of complementary therapies; there will be a detailed description of the development and purpose of each category; within each category, the candidate will identify **one** complementary therapy and give a comprehensive explanation of where it is used and how it works alongside orthodox medicine - it is recommended that at least **one** of these will be the complementary therapy that the person who uses services is receiving; candidates show the similarities and differences in the complementary therapies; the work shows evidence of synthesis and the holistic aspects of complementary therapies; the work will be accurate and contain correct use of technical terminology; the 'how they work alongside orthodox medicine' section is likely to be more in-depth in this mark band.
AO2	**1**	With guidance, candidates produce a basic description on how suitable two of the complementary therapies are for the person who uses services; at least one of these will be the complementary therapy that the person who uses services is receiving; there will be a copy of the questions the person who uses services was asked and a limited record of the responses; candidates outlines at least one condition or need the person who uses services has and gives a basic explanation of the suitability of each complementary therapy; the need of the person who uses services is likely to be restricted to a physical or emotional or social area; the suitability of the complementary therapies will be linked in a basic manner to the lifestyle and beliefs of the person who uses services; candidates will provide an outline of the role of the practitioners; candidates will write it in a manner which is adequate to convey meaning, although it may be expressed in a non-specialist manner;

AO	Mark Band	Characteristics of the work one may expect to see at this mark band can be summarised as follows:
AO2	2	With minimal guidance, candidates produce a detailed description on how suitable two of the complementary therapies are for the person who uses services; at least **one** of these will be the complementary therapy that the person who uses services is receiving; there will be a copy of the questions the person who uses services was asked and a detailed record of responses will show that candidates were able to obtain detailed knowledge of the person who uses services' lifestyle, beliefs and range of physical, emotional and social needs; candidate may show a holistic understanding of the person who uses services' needs, for instance by showing how physical needs will also produce emotional needs; candidate gives a sound explanation of the suitability of each complementary therapy to meet the needs the person who uses services has; the lifestyle and beliefs of the person who uses services will be soundly described and candidates will show the influence of these on the suitability of complementary therapies; candidate will provide a sound description of the role of the practitioners; candidate will write in a manner which conveys meaning, using specialist vocabulary with few errors/inaccuracies;
	3	Candidate independently produces a comprehensive description on how suitable **two** of the complementary therapies are for the individual person who uses services; at least **one** of these will be the complementary therapy that the person who uses services is receiving; the questions the person who uses services was asked will be comprehensive, and the record of responses will show that candidates were able to elicit comprehensive knowledge of the person who uses services' lifestyle, beliefs and range of physical, emotional and social needs; candidate shows a holistic understanding of the person who uses services' needs, for instance by showing how physical needs will also produce emotional needs; candidate gives a comprehensive explanation of the suitability of each complementary therapy to meet the needs the person who uses services has; the cost of treatments should be considered and compared to the person who uses services' means and a comprehensively described; the lifestyle and beliefs of the person who uses services will be described in detail and candidate will show the influence of these on the suitability of complementary therapies; candidate will provide a comprehensive description of the role of the practitioners; candidate will write in a manner which conveys appropriate meaning, using specialist vocabulary with accuracy – there will be no errors/inaccuracies.
AO3	1	Candidate will present limited evidence of primary research, using a given technique such as a survey or questionnaire to determine the views of members of the public; they have used a limited range of information sources to produce basic evidence of how healthcare practitioners view complementary therapies; the evidence is likely to be limited, but presented accurately, possibly with the use of tables or graphs; the basic analysis of the results shows any similarities or differences in the views of the public and healthcare practitioners.
AO3	2	Candidates present sound evidence of primary research, such as a survey or questionnaire, to determine the views of members of the public; they have used a range of information sources to produce sound evidence of how different healthcare practitioners view complementary therapies; the evidence is sound and presented accurately with the use of tables and/or graphs and supporting text; the sound analysis of the results explains similarities or differences in the views of the public and healthcare practitioners and also describes different views between members of the public, e.g. males and females, different age groups, social class, etc.; the views of healthcare practitioners may also be compared on gender, age or occupation.

	3	Candidates will present comprehensive evidence of primary research, such as a survey or questionnaire, to determine the views of members of the public;
		two methods are likely to have been used e.g. one primary and one secondary
		they have used a wide range of information sources to produce comprehensive evidence of how different healthcare practitioners view complementary therapies;
		the evidence is likely to be extensive and presented accurately, with the use of tables and/or graphs and detailed supporting text;
		the comprehensive analysis of the results explains similarities or differences in the views of the public and healthcare practitioners;
		it also analyses different views between members of the public, e.g. males and females, different age groups, social class etc.;
		the views of healthcare practitioners may also be compared on gender, age or occupation;
		candidates compare their results with stereotypes about complementary therapies.
AO4	**1**	Candidates carry out a basic evaluation of the evidence they have collected to draw basic conclusions about how complementary therapies and orthodox medicine have met the person who uses service's needs;
		this is likely to be based mainly on the person who uses service's own view;
		the strengths and weaknesses of the evidence are identified;
	2	Candidates carry out a sound evaluation of the evidence they have collected, from primary and secondary sources, to compare how well complementary therapies and orthodox medicine have each met the needs of the person who uses services;
		the person who uses service's own approach to life, lifestyle and beliefs is described as part of the evaluation;
		the evaluation will include how the experience of the person who uses services compares to other people's experiences;
		candidates are able to compare the person who uses services and healthcare practitioners' views to judge how well complementary therapies could work with orthodox treatments;
	3	Candidates carry out a comprehensive evaluation of the extensive evidence they have collected, from primary and secondary sources, to compare how well complementary therapies and orthodox medicine have each met the physical and emotional needs of the person who uses services;
		the impact of the person who uses service's own approach to life, lifestyle and beliefs is analysed as part of the evaluation;
		the evaluation also considers in detail how the person who uses service's experience compares to other people's experiences;
		candidates are able to extrapolate the person who uses services and healthcare practitioners' views to draw conclusions on the extent that the complementary therapy could work with or replace some orthodox treatments.

Unit F919 - Assessment Evidence Grid

Unit F919: Care practice and provision			
What the candidate need to do:			
Candidates need to produce an investigation to show how demographic factors influence the planning and provision of health, social care and early years services in the local area, evaluating how **two** different local services and practitioners who work there meet the needs of **one** person who uses services [**50 marks**]. Evidence needs to include**:** **AO1:** information about how **two** demographic characteristics influence the provision of services in the local area [**10**]; **AO2:** the impact of **one** national policy or **one** piece of legislation on care practice and provision [**10**]; **AO3:** research and analysis of quality assurance methods used by the **two** services for the person who uses services [**15**]; **AO4:** an evaluation of how **two** different services meet the needs of **one** person who uses services and the approaches used by practitioners who work within them, how they work in partnership and the impact on the person who uses services [**15**]			
How candidates will be assessed:			

Assessment Objective	Mark Band 1	Mark Band 2	Mark Band 3	Mark
AO1	Candidates demonstrate basic knowledge by outlining **two** demographic characteristics and showing how these influence the planning and provision of services in the local area; **[0 1 2 3 4]**	candidates demonstrate sound knowledge by describing **two** demographic characteristics and showing how these influence the planning and provision of services in the local area; **[5 6 7]**	candidates demonstrate in-depth knowledge by describing in detail **two** demographic characteristics and showing how these influence the planning and provision of services in the local area. **[8 9 10]**	**/10**
AO2	With guidance, candidates apply basic knowledge and understanding to give a basic explanation of the impact of **one** national policy or **one** piece of legislation on care practice and provision; Ability to communicate using some appropriate terminology. Sentences have limited coherence and structure, often being of doubtful relevance to the main focus of the AO. Errors of grammar, punctuation and spelling may be noticeable and intrusive. **[0 1 2 3 4]**	With minimal guidance, candidates apply knowledge and understanding to give a sound explanation of the impact of **one** national policy or **one** piece of legislation on care practice and provision; Limited ability to organise relevant material. Some appropriate terminology used. Sentences are not always relevant with material presented in a way that does not always address the AO. There may be noticeable errors of grammar, punctuation and spelling. **[5 6 7]**	candidates work accurately and independently when applying in-depth knowledge and understanding to give a comprehensive explanation of the impact of **one** national policy or **one** piece of legislation on care practice and provision. Ability to present relevant material in a planned and logical sequence. Appropriate terminology used. Sentences, for the most part, relevant and presented in a balanced, logical and coherent manner which addresses the AO. There will be occasional errors of grammar, punctuation and spelling. candidate demonstrates the skills acquired in this unit, and other units, in this specification. **[8 9 10]**	**/10**
AO3	Candidates undertake research, using a limited range of relevant sources, when carrying out a basic analysis of the quality assurance mechanisms used by local services; **[0 1 2 3 4 5]**	candidates undertake research, using a range of relevant sources when carrying out a sound analysis of the quality assurance mechanisms used by local services; **[6 7 8 9 10]**	candidates undertake research, using a wide range of relevant information sources when carrying out a comprehensive analysis of the quality assurance mechanisms used by local services. **[11 12 13 14 15]**	**/15**

Unit F919: Care practice and provision (continued)				
Assessment Objective	Mark Band 1	Mark Band 2	Mark Band 3	Mark
AO4	Candidates provide a basic evaluation of how **two** different services meet the needs of **one** person who uses services, including the approaches used by practitioners working in each service, how they work in partnership; and the impact on the person who uses services; **[0 1 2 3 4 5]**	candidates provide a sound evaluation, making judgments and drawing straightforward conclusions about how **two** different services meet the needs of **one** person who uses services, including the approaches used by practitioners working in each service, how they work in partnership and the impact on the person who uses services; **[6 7 8 9 10]**	candidates provide a comprehensive evaluation, making reasoned judgments and drawing valid conclusions about how **two** different services meet the needs of **one** person who uses services, including the approaches used by practitioners working in each service, how they work in partnership; and the impact on the person who uses services. **[11 12 13 14 15]**	/15
			Total mark awarded:	/50

Amplification of Criteria

The further guidance below amplifies the criteria in the Assessment Evidence Grid and will help to determine the appropriate mark to be awarded for each strand.

AO	Mark Band	Characteristics of the work one may expect to see at this mark band can be summarised as follows:
AO1	1	Candidates select **two** demographic factors which have influenced the planning and provision of services; they produce an outline of the planning of services; they make limited links between the demographic factors and the planning and provision of services; candidates give a basic explanation of the influence of national or local standards/targets or objectives on the planning and provision of services; the information tends to be generic in nature; the evidence may lack detail and contain omissions and/or inaccuracies;
	2	Candidates select **two** demographic factors which have influenced the planning and provision of services; they produce a sound description of the planning of services; they include a sound description of how relevant demographic characteristics/trends are used to assess local needs, and contribute to the planning and provision of services; candidates give a sound explanation of the influence of national and local standards, targets and objectives on the planning and provision of services there are few omissions and/or inaccuracies within the evidence;
	3	Candidates select **two** demographic factors which have influenced the planning and provision of services; they produce a comprehensive description of the planning of services; candidates use written expression which uses appropriate specialist vocabulary to comprehensively describe how relevant demographic characteristics/trends are used to assess local needs and inform the planning and provision of services; they give a comprehensive explanation of the influence of national and local standards, targets and objectives on the planning and provision of services; there are no omissions or inaccuracies within the evidence.
AO2	1	With guidance, candidates use written expression which is adequate to convey meaning to give a basic explanation of the impact of **one** national policy or piece of legislation on care practice and provision; candidates give a basic explanation of the impact from **two** different perspectives, e.g. from the viewpoint of the person who uses services, the practitioner and/or the service; the evidence may lack detail and contain omissions and/or inaccuracies; candidates write in a manner which is adequate to convey meaning, although it is expressed in a non-specialist manner;
	2	With minimal guidance, candidates apply knowledge and understanding to give a sound explanation of the impact of **one** national policy or piece of legislation on care practice and provision; candidates give a sound explanation of the impact from **two** different perspectives, e.g. from the viewpoint of the person who uses services, the practitioner and/or the service; there are few omissions and/or inaccuracies within the evidence; candidates write in a manner which conveys meaning, using specialist vocabulary with few errors/inaccuracies;

AO	Mark Band	Characteristics of the work one may expect to see at this mark band can be summarised as follows:
AO2	3	Candidates accurately and independently apply in-depth knowledge and understanding to give a comprehensive explanation of the impact of **one** national policy or piece of legislation on care practice and provision; candidates give a comprehensive explanation of the impact from **two** different perspectives, e.g. from the viewpoint of the person who uses services, the practitioner and/or the service; there are no omissions or inaccuracies within the evidence; candidates write in a manner which conveys appropriate meaning, using specialist vocabulary with accuracy – there are no errors/inaccuracies.
AO3	1	Candidates undertake research, using a limited range of appropriate sources, e.g. textbooks, magazines; candidates use the collected information to carry out a basic analysis of the quality assurance mechanisms used by **two** services; the basic analysis may be generic but must link to **two** services; the evidence may lack detail and contain omissions and/or inaccuracies;
AO3	2	Candidates undertake research, using a range of appropriate sources, e.g. primary and secondary sources; candidates use the collected information to carry out a sound analysis of the quality assurance mechanisms used by **two** services; a detailed analysis, with appropriate examples, of a range of quality assurance mechanisms used by **two** services is evident; there are few omissions and/or inaccuracies within the evidence;
AO3	3	Candidates undertake research using a wide range of appropriate primary and secondary sources of information, e.g. candidates collected primary evidence through interviews, surveys or observation and secondary evidence via the internet, organisational documents and publications; candidates use the information gathered to carry out a comprehensive analysis of the quality assurance mechanisms used by **two** services; an in-depth analysis, with a range of appropriate examples, of a wide range of quality assurance mechanisms used by **two** services is evident; there are no omissions or inaccuracies within the evidence.
AO4	1	Candidates provide a basic evaluation of the strengths and weaknesses of the approach(es) used by practitioners working in **two** different services; the information tends to be expressed in a non-specialist way, with omissions, and there could be some inaccuracies, although at the higher end of the band candidates begin to relate the approach used to show how this meets the needs of the person who uses services; a basic analysis of how the services/practitioners work in partnership is included, although there are limited examples given and/or they lack detail; at a basic level, candidates evaluate strengths and weaknesses of working in partnership for people who use services; although the evaluative statements tend to be expressed in a non-specialist way, lack detail, and show some inaccuracies, candidates' written expression is adequate to convey meaning; the evidence may lack detail and contain omissions and/or inaccuracies;
AO4	2	Candidates provide a sound evaluation, making judgements and drawing straightforward conclusions about the approaches used by practitioners working in two different services, candidates use the approaches competently to give a sound analysis of how practitioners meet the needs of the person who uses services; a sound analysis, with appropriate examples, of how the services and practitioners work in partnership is evident; candidates apply knowledge, understanding and skills to give a sound evaluation of the impact of working in partnership for people who use services; there are few omissions and/or inaccuracies within the evidence;

		3	Candidates provide a comprehensive evaluation, making reasoned judgements and drawing valid conclusions about the approaches used by practitioners working in **two** different services;
			candidates use the approaches to give a comprehensive analysis of how practitioners meet the needs of the person who uses services;
			a comprehensive analysis, using a range of appropriate examples, of how practitioners work in partnership is evident;
			candidates apply in-depth knowledge, understanding and skills to comprehensively evaluate how working in partnership benefits people who use services;
			there are no omissions or inaccuracies within the evidence.

Unit F922 - Assessment Evidence Grid

Unit F922: Child development		
What the candidate needs to do:		
Candidates need to produce evidence based on the study of a child's development up to the age of **eight** years [**50 marks**]. Evidence needs to include**:**		
AO1: a description of **two** patterns in each area of development of children, described from birth to **eight** years, explaining **two** methods of monitoring development [**10**];		
AO2: an explanation of the factors that have influenced the development of the child studied and how they have affected his/her development, comparing their development with the norms [**10**];		
AO3: research relating to **two** roles of play and how they can be reflected in the development of the child studied [**15**];		
AO4: records of the planning and making of a learning aid for the child studied to use and an evaluation of the effectiveness of the aid and the benefits to the child studied [**15**].		
How candidates will be assessed:		

Assessment Objective	Mark Band 1	Mark Band 2	Mark Band 3	Mark
AO1	Candidates give a basic description of **two** patterns in each area of development of children, from birth to **eight** years; give a basic explanation of **two** methods used to monitor development; **[0 1 2 3 4]**	Candidates give a detailed description of **two** patterns in each area of development of children, from birth to **eight** years, showing a sound understanding of the patterns in the development of children; give a sound explanation of **two** methods used to monitor development; **[5 6 7]**	Candidates give a comprehensive description of **two** patterns in each area of development of children from birth to **eight** years, demonstrating comprehensive knowledge and understanding of the patterns in the development of children; give a comprehensive explanation of **two** methods used to monitor development. **[8 9 10]**	**/10**
AO2	With guidance, candidates give a basic explanation of the factors that have influenced the child's development, showing a basic understanding of their effect on the child and of how their development compares to the norms; Ability to communicate using some appropriate terminology. Sentences have limited coherence and structure, often being of doubtful relevance to the main focus of the AO. Errors of grammar, punctuation and spelling may be noticeable and intrusive. **[0 1 2 3 4]**	With minimal guidance, candidates give a sound explanation of the factors that have influenced the child's development, showing a sound understanding of their effect on the child, comparing their development with the norms and explaining any variations from the norms; Limited ability to organise relevant material. Some appropriate terminology used. Sentences are not always relevant with material presented in a way that does not always address the AO. There may be noticeable errors of grammar, punctuation and spelling. **[5 6 7]**	candidates, accurately and independently, give a comprehensive explanation of the factors that have influenced the child's development, showing an in-depth understanding of their effect on the child, comparing their development with the norms and explaining in detail any variations from the norms. Ability to present relevant material in a planned and logical sequence. Appropriate terminology used. Sentences, for the most part, relevant and presented in a balanced, logical and coherent manner which addresses the AO. There will be occasional errors of grammar, punctuation and spelling. **[8 9 10]**	**/10**

Unit F922: Child development (continued)				
Assessment Objective	Mark Band 1	Mark Band 2	Mark Band 3	Mark
AO3	Using a limited range of information sources candidates produce a basic analysis of how **two** roles of play have affected the development of the child studied, giving appropriate examples for each role; **[0 1 2 3 4 5]**	using a range of relevant information sources, candidates produce a sound analysis of how **two** roles of play have affected the development of the child studied, using a range of appropriate examples for each role; **[6 7 8 9 10]**	candidates undertake research, using a wide range of appropriate information sources, to make reasoned judgements in order to produce a comprehensive analysis of how **two** roles of play have affected the development of the child studied, using a wide range of appropriate examples for each role. **[11 12 13 14 15]**	**/15**
AO4	Candidates produce records of planning and implementing a learning aid/activity for the child studied, including a basic explanation of the impact on the child's development, evaluating, at a basic level, the effectiveness of the learning aid/activity and making general recommendations for improvement; **[0 1 2 3 4 5]**	candidates produce records of planning and implementing a learning aid/activity for the child studied, including a sound explanation of the impact on the development of the child, and a sound evaluation of the effectiveness of the learning aid/activity, making recommendations for improvement; **[6 7 8 9 10]**	candidates produce records of planning and implementing a learning aid/activity for the child studied, including a comprehensive explanation of the impact on the child's development and a comprehensive evaluation of the effectiveness of the learning aid/activity, making realistic and informed recommendations for improvement. **[11 12 13 14 15]**	**/15**
			Total mark awarded:	**/50**

Amplification of Criteria

The further guidance below amplifies the criteria in the Assessment Evidence Grid and will help to determine the appropriate mark to be awarded for each strand.

		Amplification of Criteria
AO	**Mark Band**	**Characteristics of the work one may expect to see at this mark band can be summarised as follows:**
AO1	**1**	Candidates will give a basic description of **two** patterns for each area of development in children, from birth to eight years; candidates also give a basic explanation of **two** methods used to monitor the development of children; there may be omissions and/or inaccuracies within the evidence;
	2	candidates will give a detailed description of **two** patterns for each area of development in children, from birth to eight years; there will be evidence of a sound understanding of the patterns in the development in children; candidates give a sound explanation of **two** methods used to monitor the development of children, demonstrating sound understanding of their importance; the work will be mainly accurate and contain few omissions/inaccuracies within the evidence;
	3	candidates will give a comprehensive description of **two** patterns for each area of development in children, from birth to eight years; there will be evidence of comprehensive knowledge and understanding of the patterns in the development of children; candidates give a comprehensive explanation of **two** methods used to monitor the development of children, demonstrating an in-depth understanding of their importance; the work will be comprehensive and accurate; there will be no omissions or inaccuracies within the evidence
AO2	**1**	With guidance, candidates provide a basic explanation of the factors that have affected the child's development; influencing factors need to be considered, with some attempt to apply these to the child studied; candidates give a basic explanation to show a basic understanding of the effect of the factors on the child's development, e.g. poor housing, which can lead to overcrowding and lack of space to play, can affect both the physical and social development of a child; they will have compared at a basic level the child's development to the norms for each area of development, from birth to eight years, e.g. at **9** months a physical norm would be that a child pulls him/herself into a standing position; there may be some omissions and inaccuracies but there will be evidence of some application of knowledge; candidates will write in a manner which is adequate to convey meaning, although it will be expressed in a non-specialist manner;
	2	Candidates are required to provide a sound explanation of a range of factors that have affected the child's development; influencing factors need to be considered and applied to the child studied; Candidates give a sound explanation to show sound understanding of the effect of the factors on the child's development, e.g. poor housing, which can lead to overcrowding and lack of space to play, can affect both the physical and social development of a child; candidates will include a detailed comparison between the child's development and the norms for each area of development, from birth to eight years, e.g. at **18** months a language pattern (milestone) would be that a child can say between **6-20** recognisable words, but understands many more; they will give a sound explanation of any variations from the norms; demonstrating a sound level of understanding; there will be few omissions and/or inaccuracies within the evidence; candidates will write in a manner which conveys meaning, using specialist vocabulary with few errors/inaccuracies;

AO	Mark Band	Characteristics of the work one may expect to see at this mark band can be summarised as follows:
AO2	3	Working accurately and independently, candidates are required to provide a comprehensive explanation about a wide range of factors that have affected the child's development; influencing factors need to be considered and applied to the child studied; Candidates give a comprehensive explanation to show an in-depth understanding of the effect of the factors on the child's development, e.g. poor housing, which can lead to overcrowding and lack of space to play, can affect both the physical and social development of a child; candidates will include a comprehensive comparison between the child's development and the norms for each area of development from birth to eight years, showing a high level of understanding; they will give a comprehensive explanation of any variations from the norms; demonstrating a comprehensive level of understanding; there will be no omissions or inaccuracies within the evidence; candidates will write in a manner which conveys appropriate meaning, using specialist vocabulary with accuracy – there will be no errors/inaccuracies.
AO3	1	Candidates' evidence will show that a limited range of sources of information have been used for research, e.g. books and the internet; a basic record of the resources used will be kept; the information will be at a basic level, with a basic analysis of how **two** roles of play have affected the child's development, a limited range of appropriate examples will be given for each role; there may be omissions and/or inaccuracies within the evidence;
	2	Candidates' evidence will show that a range of appropriate sources of information have been used for research, e.g. books, the internet, questionnaires; a detailed record of the resources used will be kept; the information will be detailed, with a sound analysis of how **two** roles of play can be reflected in the child's development, a range of appropriate examples will be used for each role; there will be few omissions and/or inaccuracies within the evidence;
	3	Candidates' evidence will show that that an appropriate and wide range of sources of information have been used for research, e.g. books, articles, Internet and primary sources; a comprehensive record of the resources used will be kept; the information will be comprehensive, with a comprehensive analysis which highlights candidates' ability to make reasoned judgments of how two roles of play can be reflected in the child's development, a wide range of appropriate examples will be used for each role; there will be no omissions or inaccuracies within the evidence.
AO4	1	Candidates will have chosen a simple learning aid/activity to do with the child studied, giving a basic explanation of the impact on the child's development; the plan will outline the methods to be used and will give timescales, which may not be realistic; the evaluation will consider at a basic level the effectiveness of the learning aid/activity and show limited ability to analyse the benefits to the child studied; candidates will demonstrate the ability to make general recommendations for improvements; there may be omissions and/or inaccuracies within the evidence;

AO4	2	Candidates will have chosen an activity to do with the child studied, giving a sound explanation of the impact on the child's development, e.g. a child who needs to develop greater independence ready for school may use a doll with buttons and laces to practice fine motor skills and hand/eye co-ordination; the plan will be detailed and outline the methods to be used, including resources needed, safety considerations and will give timescales which will be accurate; the evaluation will be sound, showing candidates' ability to reflect on the effectiveness of the learning aid/activity and to give a sound analysis of the benefits to the child studied; candidates will demonstrate the ability to make recommendations for improvements; there will be few omissions and/or inaccuracies within the evidence;
	3	Candidates will have chosen an activity to do with the child studied, giving a comprehensive explanation of the impact on the child's development that shows the activity will be sufficiently challenging for the child studied; the plan will be comprehensive and describe in detail the methods to be used, including resources needed, safety considerations and will give timescales, which will be accurate; comprehensive reasons will be given for the actions taken; the evaluation will be comprehensive, demonstrating the candidates' ability to reflect in detail on the effectiveness of the learning aid/activity and to give a comprehensive analysis of the benefits to the child studied; candidates will demonstrate the ability to make realistic and informed recommendations for improvements; there will be no omissions or inaccuracies within the evidence.

Unit F923 - Assessment Evidence Grid

Unit F923: Mental-health issues

What the candidate need to do:

Candidates need to produce an investigation of mental-health needs and issues, including a profile of **one** person who uses services [**50 marks**]. Evidence needs to include**:**

AO1: understanding of **three** types and possible causes of mental-health illnesses and associated mental-health needs [**10**];

AO2: an explanation of **three** effects of the mental-health illness on the person who uses services, their family and society, in both the short and long term [**10**];

AO3: research on preventative and coping strategies and practitioners/individuals that could provide support for the person who uses services, including research on **one** piece of appropriate current legislation [**15**];

AO4: an evaluation of the concepts and definitions of mental health, including the portrayal of images and perceptions in the media (using examples) of people with mental-health needs and possible negative and positive effects of such portrayal, making recommendations for improvements. [**15**].

How candidates will be assessed:				
Assessment Objective	Mark Band 1	Mark Band 2	Mark Band 3	Mark
AO1	Candidates produce a basic outline of **three** types of mental-health illnesses, their possible causes and a basic explanation of the resultant mental-health needs; **[0 1 2 3 4]**	candidates provide a sound description of **three** types of mental-health illnesses, their possible causes and a sound explanation of how these relate to the resultant mental-health needs; **[5 6 7]**	candidates present a comprehensive description of **three** types of mental-health illnesses and their possible causes, and a comprehensive explanation of how these relate to mental-health needs. **[8 9 10]**	**/10**
AO2	Candidates produce a basic explanation of the effects of the mental illness for the person who uses services and how these apply to the individual, their family and society, including references to both short and long term effects; Ability to communicate using some appropriate terminology. Sentences have limited coherence and structure, often being of doubtful relevance to the main focus of the AO. Errors of grammar, punctuation and spelling may be noticeable and intrusive. **[0 1 2 3 4]**	candidates demonstrate an ability to apply knowledge to produce a sound explanation of the effects of the mental illness to the person who uses services, their family and society, including references to a range of both short and long term effects; Limited ability to organise relevant material. Some appropriate terminology used. Sentences are not always relevant with material presented in a way that does not always address the AO. There may be noticeable errors of grammar, punctuation and spelling. **[5 6 7]**	working accurately and independently, candidates produce a comprehensive explanation showing application of knowledge of the effects of the mental illness to the person who uses services, their family and society, including references to a wide range of short and long term effects. Ability to present relevant material in a planned and logical sequence. Appropriate terminology used. Sentences, for the most part, relevant and presented in a balanced, logical and coherent manner which addresses the AO. There will be occasional errors of grammar, punctuation and spelling. **[8 9 10]**	**/10**
AO3	Candidates produce research, from limited sources, about the main preventative and coping strategies, including a basic analysis about practitioners/individuals that could provide support for the person who uses services and the impact of **one** piece of appropriate current legislation; **[0 1 2 3 4 5]**	Candidates produce research, from a range of sources, about the main preventative and coping strategies, including a sound analysis about appropriate practitioners/individuals that could support the person who uses services, and analyses of the impact of **one** piece of appropriate current legislation; **[6 7 8 9 10]**	Candidates produce research, from a wide range of sources, that demonstrates the ability to make reasoned judgements about the preventative and coping strategies, including a comprehensive analysis about appropriate practitioners/individuals that could provide support for the person who uses services, and analyses in detail the impact of **one** piece of appropriate current legislation. **[11 12 13 14 15]**	**/15**

Unit F923: Mental-health issues (continued)				
Assessment Objective	Mark Band 1	Mark Band 2	Mark Band 3	Mark
AO4	Candidates provide a basic evaluation, using limited sources, of the concepts/definitions of mental health and how the media portray people with mental-health needs, including possible positive and negative effects of this portrayal and make limited recommendations for improvements; **[0 1 2 3 4 5]**	candidates give a sound evaluation, using a range of sources, of the concepts/definitions of mental health and how the media portray people with mental-health needs, including possible positive and negative effects of this portrayal and make realistic recommendations for improvements; **[6 7 8 9 10]**	Candidates provide a well-balanced evaluation, using a wide range of sources, of the concepts/definitions of mental health and how the media portray people with mental-health needs, including possible positive and negative effects of this portrayal alongside realistic and informed recommendations for improvements. **[11 12 13 14 15]**	**/15**
			Total mark awarded:	**/50**

Amplification of Criteria

The further guidance below amplifies the criteria in the Assessment Evidence Grid and will help to determine the appropriate mark to be awarded for each strand.

AO	Mark Band	Characteristics of the work one may expect to see at this mark band can be summarised as follows:
AO1	**1**	Candidates produce a basic outline of **three** types of mental illness, alongside possible causes and resultant mental-health needs; candidates need to show they understand the basic symptoms and definitions of these **three** mental illnesses, there will be a basic explanation of probable resultant health needs; the work may be list-like in its approach, although it needs to include some discussion in relation to possible causes; there may be omissions and/or inaccuracies within the evidence;
	2	Candidates produce a sound description of **three** types of mental illness and a sound description of possible causes and resultant mental-health needs of these illnesses; candidates need to include a detailed description of the main symptoms and definitions of these **three** illnesses; resultant mental-health needs should be explained soundly with a clear link to each illness discussed; candidates' discussion on the possible causes of mental illness needs to show some understanding of the difficulty of isolating specific causes; there may be **one** or **two** errors/misunderstandings; there will be few omissions and/or inaccuracies within the evidence;
	3	Candidates produce a comprehensive description of **three** types, and possible causes, of mental illnesses, with clear relation of these to resultant mental-health needs; their answers need to demonstrate comprehensive understanding throughout and effective use of terminology; candidates need to include a comprehensive description of the symptoms and definitions of these **three** illnesses; resultant mental-health needs should be accurately and comprehensively explained with explicit links to each illness discussed in detail; candidates' discussion on the possible causes of mental illness clearly demonstrates comprehensive understanding of the complexity of isolating causes, there also needs to be information on how causes may interrelate; there will be no omissions or inaccuracies within the evidence.
AO2	**1**	Candidates need to include evidence of a basic explanation which demonstrates basic understanding of the effects of the mental illness on the person who uses services in the short and long term; the information on the effects may lack detail, but will include a specific and general effects on the person who uses services, their family and society; there may be omissions and/or inaccuracies within the evidence; candidates will write in a manner which is adequate to convey meaning, although it will be expressed in a non-specialist manner;
	2	Candidates need to show expansion from basic effects to include evidence of a sound explanation of the effects of the mental illness and how a range of effects produce challenges for the person who uses services in the short- and long-term; candidates need to include evidence of applying sound knowledge of the effects of mental illness on their chosen person who uses services; reference needs to be made to both general and specific effects, including reference to examples of these effects on the person who uses services, their family and society; there will be few omissions and/or inaccuracies within the evidence; candidates will write in a manner which conveys meaning, using specialist vocabulary with few errors/inaccuracies;

AO2	3	Working accurately and independently, candidates need to produce a comprehensive explanation to show application of knowledge of a wide range of effects of mental illness to their chosen person who uses services in the short- and long-term; candidates need to include evidence of accurately applying in-depth knowledge of the effects of mental illness to their chosen person who uses services; references to a wide range of specific and general effects need to be explicit and the effects on the person who uses services, their family and wider society explained comprehensively; there will be no omissions/inaccuracies within the evidence; candidates will write in a manner which conveys appropriate meaning, using specialist vocabulary with accuracy – there will be no errors/inaccuracies.
AO3	1	Candidates need to produce evidence of research from limited sources of information, outlining the main preventative/coping strategies relevant for the person who uses services; candidates will include basic analysis about the roles of practitioners/individuals that could provide support for the person who uses services, including limited examples of the types of support they could provide with basic links to the individual; **one** piece of appropriate current legislation will be analysed at a basic level that is relevant to their chosen individual, the analysis of this link may be brief with basic understanding of the possible impact; the evidence may lack detail; there may be omissions and/or inaccuracies within the evidence;
	2	Candidates need to produce evidence of research from a range of sources of information to analyse the main preventative/coping strategies; candidates will include a sound analysis about the roles of practitioners/individuals that could provide support for the person who uses services, including a range of examples of the type of support they could provide for explicitly for the individual; the impact of **one** piece of appropriate current legislation will be analysed soundly, demonstrating clear understanding of the relevance to their chosen individual, the analysis of this link will be sound; the evidence will show understanding and application of knowledge; there will be few omissions and/or inaccuracies within the evidence;
AO3	3	Candidates' need to produce evidence of research from a wide range of sources, and make to thoroughly analyse a range of preventative/coping strategies relevant for the person who uses services; the link to the individual will be explicit throughout; candidates will include a comprehensive analysis about the roles of appropriate practitioners/individuals that could provide support for the person who uses services, including a range of specific examples of the types of support they could provide with explicit links to the individual; the impact of **one** piece of appropriate current legislation will be comprehensively analysed , showing evidence of reasoned judgements on the appropriateness for their chosen individual, the analysis of this link will be comprehensive; candidates will demonstrate a high level of understanding and the ability to be pragmatic and practical in judgements made; there will be no omissions or inaccuracies within the evidence.

AO	Mark Band	Characteristics of the work one may expect to see at this mark band can be summarised as follows:
AO4	1	Candidates will use limited sources to basically evaluate the concepts/definitions of mental health; candidates evidence, in relation to the media's portrayal of people with mental-health needs, must include a basic evaluation of such portrayal, outlining positive and negative examples; candidates give a basic explanation of possible positive and negative effects of portrayal in the media on individuals and wider society; these may or may not be applicable directly to the examples used; candidates' recommendations for improvements may be limited, brief and possibly list-like in their approach; there may be omissions and/or inaccuracies within the evidence;
	2	Candidates will use a range of sources to give a sound evaluation of the concepts/ definitions of mental health; candidates' evidence needs to show evidence of the ability to effectively utilise examples gathered, to give a sound evaluation of positive and negative examples of the media's portrayal of people with mental-health needs; candidates give a sound evaluation of possible positive and negative effects of portrayal in the media on individuals and wider society; these will be directly applicable to the examples used; candidates will make realistic recommendations for improvement demonstrating the ability to make reasoned judgements; there will be few omissions and/or inaccuracies within the evidence;
	3	Candidates will use a wide range of appropriate sources to provide a comprehensive and well-balanced evaluation of the concepts/definitions of mental health; candidates' evidence will demonstrate the ability to effectively utilise a wide range of examples to give a comprehensive evaluation of positive and negative examples of the media's portrayal of people with mental-health needs; candidates give a comprehensive evaluation of possible positive and negative effects of portrayal in the media on individuals and wider society; these will be explicitly linked in detail to the examples used; candidates will make well-reasoned, realistic, informed recommendations for improvements that show understanding of the main issues associated with the way the media can influence attitudes; there will be no omissions or inaccuracies within the evidence.

Unit F925 - Assessment Evidence Grid

Unit F925: Research methods in health and social care
What the candidate needs to do:
Candidates need to produce a research report that would be relevant to a health or social care or early-years setting that they have designed and carried out [**50** marks]. Evidence needs to include**:**   **AO1:** knowledge of the purposes of research and an awareness of **three** different methods of research available. [**10**];   **AO2:** an explanation of the rationale for the chosen research area. An understanding of the ethical issues and sources of error and bias to be taken into consideration when planning and carrying out the research project and justification of their choice of research methods [**10**];   **AO3:** research into their chosen area of study using different sources of information; presentation and analysis of their findings in an appropriate format [**15**];   **AO4:** an evaluation of the success of their research project using the predetermined aims and objectives and applying the issues of validity, reliability and representation with their recommendations for improvements and continuation of their research **[15]**.
How candidate will be assessed:

Assessment Objective	Mark Band 1	Mark Band 2	Mark Band 3	Mark
AO1	Candidate gives a basic explanation of the purposes of research and gives an outline of **three** different methods of research available; **[0 1 2 3 4]**	candidate gives a sound explanation of the purposes of research and a sound description of **three** different methods of research available; **[5 6 7]**	candidate gives a comprehensive explanation of the purposes of research and an in-depth description of **three** different methods of research available. **[8 9 10]**	**/10**
AO2	Candidate gives a basic explanation for the rationale for the chosen research area and, a basic explanation of the range of ethical issues and sources of error and bias which relate to their research project; Ability to communicate using some appropriate terminology. Sentences have limited coherence and structure, often being of doubtful relevance to the main focus of the AO. Errors of grammar, punctuation and spelling may be noticeable and intrusive; **[0 1 2 3 4]**	candidate gives a sound explanation for the rationale for the chosen research area, with a sound explanation of the range of ethical issues and sources of error and bias which relate to their research project, Limited ability to organise relevant material. Some appropriate terminology used. Sentences are not always relevant with material presented in a way that does not always address the AO. There may be noticeable errors of grammar, punctuation and spelling; **[5 6 7]**	candidate gives a comprehensive explanation for the rationale for the chosen research area and, working accurately and independently, candidate gives a comprehensive explanation of the range of ethical issues and sources of error and bias which relate to their research project. Ability to present relevant material in a planned and logical sequence. Appropriate terminology used. Sentences, for the most part, relevant and presented in a balanced, logical and coherent manner which addresses the AO. There will be occasional errors of grammar, punctuation and spelling. **[8 9 10]**	**/10**

Unit F925: Research methods in health and social care (continued)				
Assessment Objective	Mark Band 1	Mark Band 2	Mark Band 3	Mark
AO3	Candidate outlines the research method(s) used for their research, briefly describing reasons for the research methods chosen; using sources of information, candidate undertakes research into their chosen area of study, presents and interprets their findings in an appropriate format and gives a basic analysis of their findings; **[0 1 2 3 4 5]**	Candidate gives a sound description of the research methods used for their research, justifying the research methods chosen; using relevant sources of information, candidate undertakes research into their chosen area of study, clearly presents and interprets their findings in an appropriate format, and gives a sound analysis of their findings; **[6 7 8 9 10]**	Candidate gives an in-depth description of the research methods used for their research, fully justifying reasons for the research methods chosen; using a wide range of relevant sources of information, candidate undertakes research into their chosen area of study, selectively presents and interprets their findings in an appropriate and coherent format, and gives a comprehensive analysis of their findings. **[11 12 13 14 15]**	**/15**
AO4	Candidate uses the pre-determined aims and objectives from their research project to give a basic evaluation of its success, attempts to apply the issues of validity, reliability and representativeness and makes limited recommendations for improvements and continuation of the research; **[0 1 2 3 4 5]**	candidate uses the pre-determined aims and objectives from their research project to give a sound evaluation of its success, applies the issues of validity, reliability and representativeness and makes realistic recommendations for improvements and continuation of the research; **[6 7 8 9 10]**	candidate uses the pre-determined aims and objectives from their research project to give a comprehensive evaluation of its success, applies the issues of validity, reliability and representativeness and makes realistic and detailed recommendations for improvements and continuation of the research. **[11 12 13 14 15]**	**/15**
			Total mark awarded:	**/50**

Amplification of Criteria

The further guidance below amplifies the criteria in the Assessment Evidence Grid and will help to determine the appropriate mark to be awarded for each strand.

AO	Mark Band	Characteristics of the work one may expect to see at this mark band can be summarised as follows:
AO1	1	Candidates give a basic explanation of the purposes of research; give an outline of **three** different research methods which are available; the work may lack coherence and be list-like in manner; there may be omissions and/or inaccuracies within the evidence;
	2	Candidates give a sound explanation of the purposes of research; give a sound description of **three** different research methods which are available; the work will be coherent and demonstrate understanding of the subject area; there will be few omissions and/or inaccuracies within the evidence;
	3	Candidates give a comprehensive explanation of the purposes of research; give an in-depth description of **three** different research methods which are available; the work will be coherent and demonstrate understanding of the subject area; there will be no omissions or inaccuracies within the evidence.
AO2	1	Candidates give a basic explanation of the rationale for the chosen research area; there is a basic explanation of the range of ethical issues which relate to their chosen research area; there will be an outline of possible sources of error and bias in their research project; the evidence may lack detail, although candidates show a basic understanding of the ethical issues, sources of error and bias which apply to their chosen research area; there may be omissions and/or inaccuracies within the evidence; candidates will write in a manner which is adequate to convey meaning, although it will be expressed in a non-specialist manner;
	2	candidates give a sound explanation of the rationale for the chosen research area; there is a sound explanation of the range of ethical issues which relate to their chosen research area; there will be a sound description of possible sources of error and bias in their research project; the evidence will be detailed, with candidates showing a sound understanding of the ethical issues, sources of error and bias which apply to their chosen research area; there will be few omissions and/or inaccuracies within the evidence; candidates will write in a manner which conveys meaning, using specialist vocabulary with few errors/inaccuracies;
	3	candidates give a comprehensive explanation of the rationale for the chosen research area; there is a comprehensive explanation of the range of ethical issues which relate to their chosen research area; there will be a comprehensive explanation of possible sources of error and bias which relate to their research project; the evidence will be detailed, with candidates showing an in-depth understanding of the ethical issues, sources of error and bias which apply to their chosen research area; there will be no omissions or inaccuracies within the evidence; candidates will write in a manner which conveys appropriate meaning, using specialist vocabulary with accuracy – there will be no errors/inaccuracies.

AO	Mark Band	Characteristics of the work one may expect to see at this mark band can be summarised as follows:
AO3	1	Candidates outline the research methods used for their research, briefly describing reasons for the research methods chosen; candidates use limited sources of information to undertake research into their chosen area of study; evidence will be presented in an appropriate format; the evidence collected will be used to carry out a basic analysis of their findings; there may be omissions and/or inaccuracies within the evidence;
	2	Candidates give a sound description of the research methods used for their research, justifying the research methods chosen; candidates use a range of relevant information sources to undertake research into their chosen area of study; evidence will be presented clearly in an appropriate format; the evidence collected will be used to carry out a sound analysis of their findings; there will be few omissions and/or inaccuracies within the evidence;
	3	Accurately and independently, candidates give an in-depth description of the research methods used for their research, fully justifying the reasons for the research methods chosen; candidates use a wide range of relevant information sources to undertake research into their chosen area of study, there will be a balance of primary and secondary sources of data used; evidence will be selectively presented in an appropriate and coherent format; the evidence collected will be used to carry out a comprehensive analysis of their findings; there will be no omissions or inaccuracies within the evidence.
AO4	1	Candidates use the pre-determined aims and objectives from their research project to give a basic evaluation of its success, attempting to apply the issues of validity, reliability and representation in a basic manner; the strengths and weaknesses of the evidence will be identified; however, the work will lack detail and coherence; there will be limited recommendations for improvements and continuation of the research; there may be omissions and/or inaccuracies within the evidence;
	2	candidates use the pre-determined aims and objectives from their research project to give a sound evaluation of its success, applying the issues of validity, reliability and representation which will link to the evaluation; the strengths and weaknesses of the evidence will be described in detail and the work will demonstrate detail and coherence; there will be realistic recommendations for improvements and continuation of the research; there will be few omissions and/or inaccuracies within the evidence;
	3	candidates use the pre-determined aims and objectives from their research project to give a comprehensive evaluation of its success, accurately and in detail applying the issues of validity, reliability and representation which will be explicitly linked to the evaluation; the strengths and weaknesses of the evidence will be analysed in detail and the work will demonstrate detail and coherence; there will be realistic and comprehensive recommendations for improvements and continuation of the research; there will be no omissions or inaccuracies within the evidence.

Appendix C: Guidance for the Production of Electronic Coursework Portfolio

Structure for evidence

A Coursework portfolio is a collection of folders and files containing the candidate's evidence for each unit. Folders should be organised in a structured way so that the evidence can be accessed easily by a teacher or moderator. This structure is commonly known as a folder tree. It would be helpful if the location of particular evidence is made clear by naming each file and folder appropriately and by use of an index, called 'Home Page.'

There should be a top level folder detailing the candidate's centre number, candidate number, surname and forename, together with the Unit code, so that the portfolio is clearly identified as the work of one candidate.

Each candidate's Coursework portfolio should be stored in a secure area on the centre network. Prior to submitting the Coursework portfolio to OCR, the centre should add a folder to the folder tree containing Coursework mark sheets.

Data formats for evidence

In order to minimise software and hardware compatibility issues it will be necessary to save candidates' work using an appropriate file format.

Candidates must use formats appropriate to the evidence that they are providing and appropriate to viewing for assessment and moderation. Open file formats or proprietary formats for which a downloadable reader or player is available are acceptable. Where this is not available, the file format is not acceptable.

Electronic Coursework is designed to give candidates an opportunity to demonstrate what they know, understand and can do using current technology. Candidates do not gain marks for using more sophisticated formats or for using a range of formats. A candidate who chooses to use only digital photographs (as required by the specification) and word documents will not be disadvantaged by that choice.

Evidence submitted is likely to be in the form of word processed documents, PowerPoint presentations, digital photos and digital video.

To ensure compatibility, all files submitted must be in the formats listed below. Where new formats become available that might be acceptable, OCR will provide further guidance. OCR advises against changing the file format that the document was originally created in. It is the centre's responsibility to ensure that the electronic portfolios submitted for moderation are accessible to the moderator and fully represent the evidence available for each candidate.

Accepted File Formats

Movie formats for digital video evidence

MPEG (.mpg)*

QuickTime movie (.mov)*

Macromedia Shockwave (.aam)*

Macromedia Shockwave (.dcr)*

Flash (.swf)*

Windows Media File (.wmf)*

MPEG Video Layer 4 (.mp4)*

Audio or sound formats

MPEG Audio Layer 3 (.mp3)*

Graphics formats including photographic evidence

JPEG (.jpg)*

Graphics file (.pcx)*

MS bitmap (.bmp)*

GIF images (.gif)*

Animation formats

Macromedia Flash (.fla)*

Structured markup formats

*XML (*xml)*

Text formats

Comma Separated Values (.csv)

PDF (.pdf)

Rich text format (.rtf)

Text document (.txt)

Microsoft Office suite

PowerPoint (.ppt)

Word (.doc)

Excel (.xls)

Visio (.vsd)

Project (.mpp)