

Prince William School

















Why Teach Health and Social Care?

Health and social care equips our students to discover the impacts of positive and negative human development and to critically analyse how these factors affect our day to day lives. Housing social care enables students to explore areas that influence how we develop throughout life stages and in turn raise expectations of how we can live successful and healthy lives now and in our future.

health and social care enables students to learn about different health conditions which can affect individuals. Students will then be encouraged to develop health plans to improve health and well being along with overcoming any barriers. Understanding of the different care values within health and social care are developed to enable students to learn how to work within any health or social environment and why each one is important. Students will also be encouraged to do further research into the different settings and roles within those settings relating them to health conditions. Health and social care promotes opportunities for students to draw from case studies and opportunities to undertake research to complement learning and create skills that will be used throughout their lives. These skills encourage students to think outside typical teenage egocentrism and begin to challenge the way they perceive the world we live in. Furthermore, highlighting how human relationships, physical environments and socio economic status may influence how they develop.

through investigation of health and well being and how our lifestyle choices affect how healthy we are, students access different resources and external agency advice and guidance that encourages them to talk about areas and raise awareness of signs and symptoms of: abuse, addiction, illness and mental health.

Substantive Big Ideas

Health and social care offers students the opportunity to learn about those around us the growth and development of the different life stages of humans and the many factors that affect these. It is particularly suited to those that wish to enter into caring professions. It aims to give students the necessary life skills to make a difference in people's lives. The Substantive big ideas are based around P.I.E.S development, which are named as:-

À	Physical Development	Growth patterns and changes in mobility of the small and large muscles in the body.			
	Intellectual Development	Development of Thinking skills, memory and language.			
(2)	Emotional Development	Development of identity and how they cope with their feelings			
ŤŤŤ	Social Development	Development of friendships and relationships			
Working in Health and Social Care		Types of health and social care services and the skills, attributes and values required to give care.			

Disciplinary Big Ideas

Our curriculum will ensure that all our students will have the opportunity to:

Develop		Developing an awareness of what learning is required				
Q	Explore	Exploring the topic or concept though different methods (e.g. research, questioning, analysis, deep thinking, critical evaluation) and form your own understanding				
Apply		Applying knowledge and skills to a task designed to test understanding				
	Reflect	Reflecting on own learning, evaluating efforts, identifying gaps in knowledge and looking for ways to improve				

Learning for Life and Careers

Maths

Compound interests links to C1LAA C2 LAA Representing data links to C3 LAB Data handling links to C1 LAA Proportional reasoning links to C1 LAA

Developing command words in line with BTEC criteria explain, describe, analyse, Evaluate - links to all components

Essay construction - links to all components

Reading and annotating text - links to all components

Science

Developing command words in line with BTEC criteria investigate, analyse and evaluatelinks to all components

Development stages - links TO C1LAA

Factors that affect health - Links to C1LAA C3LAA

Interpret data - links to C3LAB

PSHE

Resilience links to time management for assessments Mental health and Well being - links to C3 Healthy active lifestyle - links to C1 and C3 LAA Diet and exercise - links to C1 and C3 LAA

Employability Skills

We believe the students deserve a curriculum that prepares them for career pathways in a variety of vocational areas, providing them with the knowledge and skills within health and social care that can then be transferred into a variety of environments.

Careers

Healthcare assistant; carer; Social worker; Nurse; Midwife; paramedic; Support worker; youth worker; Radiographer; physiotherapist; speech and language therapist,

Encounters with Employers

Enable students to experience the subject out of lessons to expand knowledge. Develop partnerships with external providers that extend opportunities for learning Giving deeper understanding between knowledge learnt and vocational context

Examples of Qualification Pathways

Nursing, Midwifery, Healthcare assistants, Social Workers, Occupational Therapists, Youth Workers, Support workers, Care managers



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Health and Social Care Curriculum Map – Topics by Term

	Year 10	Year 11	Year 12	Year 13	
Autumn 1	Component 1 Human growth and development across life stages and affecting factors	Component 2 Reviewing own professional practice	UNIT 1 Human growth and development through the life stages Factors affecting human growth and development	UNIT 14 Investigation and diagnosis of physiological disorders	
Autumn 2	Component 1 Human growth and development across life stages and affecting factors	Component 3 Factors that affect health and wellbeing	UNIT 1 The effects of ageing	UNIT 14 Treatment and support for service users with physiological disorders	
Spring 1	Investigate how individuals deal with life events.	Component 3 Interpreting health indicators	UNIT 2 The roles and responsibilities of people who work in the health and social care sector	UNIT 5 Principles, values and skills for the care and support needs of individuals. Ethical issues involved when providing care and support.	
Spring 2	Component 2 Types of health and social care services	Component 3 Person centred health and wellbeing improvement plans	UNIT 2 The roles of organisations in the health and social care sector	UNIT 5 Enabling individuals to overcome challenges Investigate the roles of professionals and how they work together.	
Summer 1	Component 2 Barriers to accessing healthcare services	REVISION	UNIT 2 Working with people with specific needs in the health and social care sector	Time allocated to completing coursework	
Summer 2	Component 2 Care values	EXAMS	UNIT 14 Causes and effects of physiological disorders	COURSEWORK SUBMISSION DEADLINE IN MAY-JULY	



Prince William School Health & Social Care Curriculum Map – Substantive Knowledge Progression















	Year 10	Year 11		Year 12	Year 13		
Physical Development	 Infancy (birth to 2 years): Rapid physical growth of weight and height, development of gross and fine motor skills Early childhood (3–8 years): Continued growth of weight and height, mastery of gross and fine motor skills Adolescence (9–18 years): Puberty Early adulthood (19–45 years): Peak physical fitness Middle adulthood (46–65 years): Ageing Process Later adulthood (65+ years): Ageing process continues 	 Physical factors: Inherited conditions Physical ill health Mental ill health Physical abilities and sensory impairments Diet Exercise Smoking, alcohol and substance misuse Environmental factors Exposure to pollution Impact of life events: Physical events and relationship changes physical and sensory impairment barriers Physiological health indicators Blood pressure BMI 	 Principles of growth Principles of development Gross motor skills zero to 8 years Fine motor skills zero to 8 years Physical development in adolescence Physical development in early adult hood Physical development in middle adulthood Physical development in later adulthood Nature versus nurture Genetic factors Biological factors Environmental factors Economic factors Life events and the effects of life events 	 Physical development in later adulthood Nature versus nurture Genetic factors Biological factors Environmental factors Economic factors Life events and the effects of life events 	 Impact of disorders on service users physical health The effect of diagnosis of physiological disorders on physical health The physical effects of the treatment and support for service users with physiological disorders Development of a treatment plan to meet physical care needs 		
Intellectual Development	 Infancy (birth to 2 years): Rapid development of language and thinking skills such as memory/recall Early childhood (3–8 years): Increased curiosity, language fluency develops, strong grasp of memory/recall Adolescence (9–18 years): Complex and abstract thinking develops Early adulthood (19–45 years): Mastery of abstract and creative thinking Middle adulthood (46–65 years): Complex decision making Later adulthood (65+ years): Decline in cognitive ability 	Intellectual barriers to accessing health and social care	Stages of cognitive development-Piaget Piaget - Now children think Theories of attachment Nature versus nurture Genetic factors Biological factors Environmental factors Economic factors Life events and the effects of life events	Cardiovascular disease and ageing degeneration of the nervous tissue degeneration of the sense organs osteoarthritis and nutrition dementia effects of illness common in ageing psychological effects of ageing theories of ageing provision for the aged ageing and economic effects	Impact of disorders on service users intellectual health The effect of diagnosis of physiological disorders on intellectual health The intellectual effects of the treatment and support for service users with physiological disorders Development of a treatment plan to meet intellectual care needs		
Emotional Development	 Infancy (birth to 2 years): Attachments Early childhood (3–8 years): Increased independence Adolescence (9–18 years): Self-image and self-esteem Early adulthood (19–45 years): Independent living and control over own lives Middle adulthood (46–65 years): Changes in self-image and self-esteem linked to retirement or ageing process Later adulthood (65+ years): Becoming more dependent on others Anxiety/worry Upset/sadness Grief/bereavement Happiness/contentment Security Attachment 	 Physical factors: Inherited conditions Physical factors: mental ill health Social factors – bullying and discrimination Impact of life events – physical events and relationship changes Impact of life events – life circumstances Emotional/psychological barriers 	Self concept Nature versus nurture Environmental factors Social factors Life events and the effects of life events Cardiovascular disease and ageing Degeneration of the nervous tissue Degeneration of the sense organs Osteoarthritis and nutrition Dementia Effects of illness common in ageing Psychological effects of ageing Theories of ageing Provision for the aged Ageing and economic effects		 Impact of disorders on service users emotional health The effect of diagnosis of physiological disorders on emotional health The emotional effects of the treatment and support for service users with physiological disorders Development of a treatment plan to meet emotional care needs 		



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Year 10	Year 11	Year 12	Year 13
Infancy (birth to 2 years)	Social factors – relationships and social inclusion and	• Stages of play	Impact of disorders on service users social health
Strong dependence on adults/carers, socialisation through family, engage in solitary play	exclusion	Friendships and relationships	The effect of diagnosis of physiological disorders on social
family, engage in solitary play	Social factors – bullying and discrimination.	Social development and independence	health
	Cultural factors – religion and community participation	Maturation theory	The social effects of the treatment and support for service use
Social circle widens and close friendships are formed,	Cultural factors – gender roles and expectations, gender	Social learning theory	with physiological disorders
socialisation continues through family and also friends/carers,	identity and sexual orientation	Nature versus nurture	Development of a treatment plan to meet social care needs
social play develops	Economic factors - employment situation and financial	Environmental factors	· ·
Adolescence (9–18 years):	resources	Social factors	
Wide range of formal/informal relationships develop and have	 Economic factors – housing and home environment 	Culture and religion	
influence, intimate relationships are formed	Environmental factors: exposure to pollution	Economic factors	
• Early adulthood (19–45 years):	 Impact of life events – physical events and relationship 	Life events and the effects of life events	
Intimate and long-lasting relationships are formed	changes	Cardiovascular disease and ageing	
 Adolescence (9–18 years): Wide range of formal/informal relationships develop and have influence, intimate relationships are formed Early adulthood (19–45 years): Intimate and long-lasting relationships are formed Middle adulthood (46–65 years): May have more time to socialise Later adulthood (65+ years): 	Social cultural and language barrier	Degeneration of the nervous tissue and sense organs	
May have more time to socialise		Osteoarthritis and nutrition	
• Later adulthood (65+ years):	Lifestyle indicators to measure health.	• Dementia	
May experience bereavement and reduction of social circle	• Smoking	Effects of illness common in ageing	
	Alcohol consumption	Psychological effects of ageing and theories of ageing	
		Provision for the aged and economic effects	
	Measuring health indicators	Key roles in health and social care	The causes and effects of physiological disorders
	Using published guidelines to interpret health indicators. Petroticle in its interpret health indicators.	Healthcare and social care settings	Diagnosis of physiological disorders The transfer of the provide and the
9 , 9	Potential significance of abnormal readings	Responsibilities in health and social care	Treatment and support for service users with physiological disorders
	Interpretation of data on nutrition Interpretation of data on physical activity	Supporting routines Anti-discriminatory practice	
	Interpretation of data on physical activity	Anti discriminatory practice Adapting provision of consists	 Development of a treatment plan for service users with physiological disorders to meet their care needs
	Interpretation of data on smoking Interpretation of data on alphal and substance misuse	Adapting provision of services	 Principles, values and skills which underpin meeting the care
	 Interpretation of data on alcohol and substance misuse Person-centred approaches to improving health and 	Empowerment Ensuring safety in care	and support needs of service users
Health conditions:	wellbeing.	Reports and complaints procedures	Ethical issues involved when providing care and support to
	The importance and benefits of a person-centred approach	The Data Protection Act 2018	meeting individual needs
	Recommendations and actions to improve health and	• Ensuring confidentiality	Principles behind enabling individuals with care and support
Diabetes (type 2)	wellbeing.	Accountability to professional bodies	needs to overcome challenges
	Support available when following recommendations to	Safeguarding regulations	Roles of professionals and how they work together to provide
Obesity	improve health and wellbeing.	Working in partnerships	care and support necessary to meet individual needs
asthma,	Obstacles caused by availability of resources.	Holistic approaches	
chronic obstructive pulmonary disease (COPD)	Obstacles caused by unachievable targets	Monitoring care internally & externally	
Additional needs – sensory impairments, physical	Obstacles caused by lack of support	Public Sector, Private and voluntary services	
impairments, learning disability.		Hospitals, day care units, hospice care, residential care, workplace and domiciliary care	
primary care		Access to services	
secondary care		Barriers to services	
tertiary care		Representing service user interests	
Social care services:		• Advocacy	
services for children and young people		Regulation and inspection process in England, Wales and Northern Ireland	
 services for adults or children with specific needs services for older adults 		Early years care	
 physical barriers, 		Later adulthood care	
barriers to people with sensory disability		Policies, procedures and regulations	
barriers to people with sensory disability barriers to people with different social and cultural backgrounds		Working practices in healthcare	
barriers to people that speak English as an additional language		Working practices in social care	
or those who have language or speech impairments:		Regulation or professions	
geographical barriers		Meeting standards	
barriers for people with learning disabilities:financial barriers		Training for health and social care workers	
financial barriers		Safeguarding employees Ill health and specific peeds	
Values in health and social care		 Ill health and specific needs Caring for people with mental ill health, learning disabilities, physical and sensory disabilities 	
 Values in health and social care The 6 Cs 		- Carring for people with mental in health, learning disabilities, physical and sensory disabilities	



Prince William School Health and Social Care Curriculum Map – Disciplinary Knowledge Progression













	Year 10	Year 11	Year 12	Year 13
Develop	 Developing an awareness of what learning is required Schemes of learning and learning journeys given to students Dedicated lessons to focus on understanding assignment briefs and coursework writing skills 	 Schemes of learning and learning journeys given to students Exam structure and what to expect. Looking at Examiners reports and mark schemes 	 Schemes of learning and learning journeys given to students Dedicated lessons to focus on exam writing skills Dedicated lessons to focus on report writing skills Exam structure and what to expect. Looking at Examiners reports and mark schemes 	 Schemes of learning and learning journeys given to students Dedicated lessons to focus on understanding assignment briefs and coursework writing skills
Explore	Exploring the topic or concept though different methods (e.g. research, questioning, analysis, deep thinking, critical evaluation) and form your own understanding. • Coursework writing skills and command words • Learning how to write for the pass, merit and distinction Criteria. • Effective PEEL paragraphs • Effective Evaluation • Referencing skills	 Exam writing skills. Effective PEEL paragraphs for level 2 Effective Evaluation for level 2 	 Exam writing skills Effective PEEL paragraphs for level 3 Extended writing skills Effective Evaluation and understanding of the command words in order to effectively answer questions 	Coursework writing skills Effective Peel paragraphs
Apply	Applying knowledge and skills to a task designed to test understanding • Applying subject knowledge to case studies. • Practical demonstration of care values through role plays	Applying subject knowledge to mini case studies.	Researching skills Harvard Referencing skills Anti-plagiarism skills and knowledge	Learning how to apply subject knowledge to extended case studies.
Reflect	Reflecting on own learning, evaluating efforts, identifying gaps in knowledge and looking for ways to improve • Resubmission opportunities for NEA reflecting on where improvements can be made	 Reflective practice through the acquisition of knowledge and skills. Responding to feedback from exam practice questions 	Subject knowledge tests to focus on gaps in learning. Reflecting on the key areas for development.	Reflective practice through the acquisition of knowledge and skills



Prince William School Health and Social Care Disciplinary Vocabulary













Progression of Vocabulary							
Year 10	Year 11	Year 12	Year 13				
	← Reinforce Previous	← Reinforce Previous	← Reinforce Previous				
State	State	Describe	Describe				
Complete	Complete	Discuss	Discuss				
Describe	Describe	Evaluate	Evaluate				
Explain	Explain	Explain	Explain				
Give	Give	Justify	Justify				
Identify	Identify	Outline	Outline				
Match	Match	To what extent	To what extent				
		Which	Which				



Prince William School Health and Social Care Key Vocabulary















	Year 10		Year 11		Year 12		Year 13	
nn 1	Characteristics	Development	Confidentiality	Person-centred approach	Growth	Milestone	metabolism	Coma
utun	Life stages	Infancy	Burnout	Dignity	Development	Gross Motor skills	Pancreas	Peak flow expiration
Au	Growth	Lifestyle	Self-respect	Empathy	Centile lines	Fine Motor Skills	Blood glucose	Spina bifida
	Classification	Menopause			Development norms	Adolescence	Dehydration	diagnosis
2								
mn	Contentment	Gender role	Acute	Monitor	Puberty	Life expectancy	Sign	Value based system
utun	Self-esteem	Role model	Chronic	Nicotine	Hormones	Abstract logical thinking	Symptom	Care package
A	Low self-esteem	Material Possessions	Short term	Addiction	Menopause	Egocentric thinking	Clinical diagnosis	Stairlift
	Genetic Inheritance	Life events	Long term	Wealth	Cognitive impairment	Concrete logical thinking	Referral	Meals on wheels
ıg 1	Expected life event	Relationship changes	Social class	Self-esteem	Equilibrium	Stranger anxiety	Personal attributes	Conflict of interest
pring	Unexpected life event	Life circumstances	Material possessions	Physiological	Disequilibrium	Nature/nurture	Imbuing	Clinical commission groups
S	Bereavement	Adapt	Income	Cardiovascular System	Accommodation	Maturation	Ethical principles	Advisory board
	Physical events	Respite care	Pollution	Peak Flow	Self concept	Positive reinforcement	Morals	DBS Check
2 9	Professional	Neurological	Potential Significance	Norm	Negative reinforcement	Pollutant	National eligibility criteria	Optometrist
ring	Secondary Care	Identity	Collaboratively	Targets	Diathesis	Respiratory disorders	Supported living services	Chronic condition
Sp	Tertiary care	Sensory Impairment	Empathy	Review	Genetic Predisposition	Hypothermia	Commissioning	Protocols
	Physiotherapy	Respite care	Goal	Formal Support	Susceptibility	General Practitioner	Rehabilitative care	
	Domiciliary Care				Preventative care			
e l								
ner			Informa	l Support	Consultant	Procedures		
umm			Psych	ological	Nurse Practitioner	Safeguarding		
Su			Sti	gma	Health screening	Complementary therapies		
					Policies	Assistive technology		
					Anti-discriminatory practice			
2					Code of practice			
Jer					Empowerment			
mm					Advocate			
Su					Risk assessment			
					Whistleblowing			
					Holistic approach			
					Disabling environment			