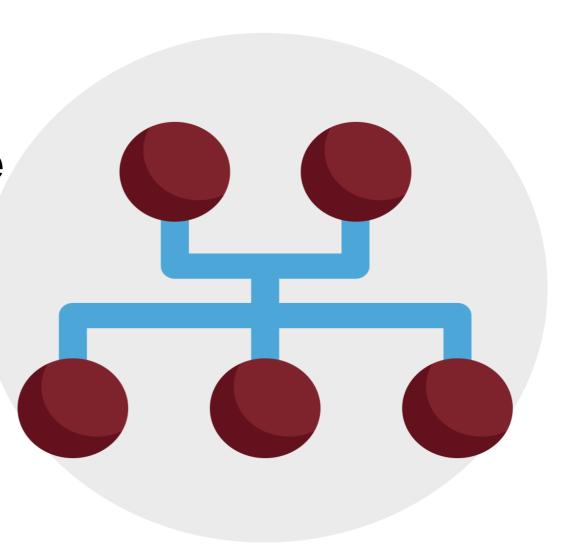


Health & Social Care

Curriculum Mapping

2021



Concept	Explanation of concept
Reductionism and Holism	Students must understand the potential benefits and limitations of each approach. They will recognise the importance of holistic, individualised care provision and the limitations of interpreting data, observations in isolation without regard for the necessity of evidence based clinical judgement
Interpretation and analysis of numerical and lifestyle data	Students must develop confidence and accuracy to interpret personal and published data. The must consider the source of data and justify reliability and validity
Individualism	Students must demonstrate an understanding of the uniqueness of each individual - they must recognise that although there are paremeters of normal / abnormal there can be considerable variation in measurements and this may / may not be clinically significant / cause for concern or intervention
Team Working	Students must demonstrate regard for the scope of Health and Social Care services and how service providers and service users work together harmoniously to maximise positive outcomes and increase efficiency
Strength based, solution focussed approach	Students must understand and apply a strength based and solution focussed approach to practice. They will consistently highlight actions to increase confidence / independence and utilise empowerment to enable individuals to make informed decisions about their care.

ptember 2021- July 20	Half term 1	Half term 2	Half term 3	Half term 4	Half term 5	Half term 5/6
Year 10						
Year 10 Learning	to ages Areas of development: Physical,Intellectual, Emotional and Social (PIES) Key aspects of	HUMAN LIFESPAN DEVELOPMENT A2 C1 Factors that affect different aspects of development: Physical Factors Social and Clultural factors Economic factors ASSESSMENT Formal assignment 'Understand human growth and development across life stages and factors that affect it'	HUMAN LIFESPAN DEVELOPMENT A1 AND A2 ASSESSMENT Formal assignment Understand human growth and development across life stages and factors that affect it' BTEC Authorised assignment brief as per assessment plan	HUMAN LIFESPAN DEVELOPMENT B1	HUMAN LIFESPAN DEVELOPMENT B1 and B2 ASSESSMENT Formal assignment Threstigate how individuals deal with life events' BTEC Authorised assignment brief as per assessment plan	HEALTH AND WELLBEING Learning Aim A - Factors that affect health and wellbeing Learn what 'being healthy' means to different people Explore the different factors that might influence health and wellbeing
Concepts	Reduction and Holism Individualism Team working Strength based, solution focussed approach	Reduction and Holism Interpretation and analysis of numerical and lifestyle data Individualism Team working Strength based, solution focussed approach	Reduction and Holism Interpretation and analysis of numerical and lifestyle data Individualism Team working Strength based, solution focussed approach	Reduction and Holism Interpretation and analysis of numerical and lifestyle data Individualism Team working Strength based, solution focussed approach	Reduction and Holism Interpretation and analysis of numerical and lifestyle data Individualism Team working Strength based, solution focussed approach	Reduction and Hollsm Interpretation and analysis of numerical and lifestyle data Individualism Team working Strength based, solution focussed approach
What is needed to master the knowledg e	A1 Identification of the 6 main life stages linked to ages Understanding that although development is holisitic it can be classified into four areas PIES Description of the anticipated physical, intellectual, emotional and social development at each life stage including: PHYSICAL - Gross and fine motor skills and growth patterns. Primary and secondary sexual characteristics. Menopause, loss of mobility, muselt one and skin elasticity INTELLECTUAL - Cognitive development including problem solving, abstract and creative thinking, development of memory and recall EMOTIONAL - Bonding and attainment, security and independence. Contentment, self image and self esteem	Idenitfication of factors that affect growth and development PHYSICAL - Genetic inheritance, experience of illness and disease. Diet and lifestyle choices and appearance SOCIAL AND CULTURAL - Culture, religion, community involvement, gender roles and expectations, educational experience. Influence of role models, social isolation and personal relationships with friends and family ECONOMIC - Income/wealth and material posessions	growth and development across three life stages of a selected individual A.2M1 Compare the different factors that have affected growth development across three life stages for a selected individual A.2P2 Explain how different factors have affected growth and development of a selected individual A.2P1 Describe growth and development across three life	B1 Understanding of the classification of life events as physical, relationship changes and life circumstances Analysis of physical events: accident and injury and ill health Analysis of relationship changes: marriage, divorce, parenthood and bereavement Analysis of life circumstances: moving house, starting school, new job, exclusion from education, redundancy, imprisonment and retirement Understanding of how different life events amy impact on PIES B2 Analysis how individuals may react differently to the same life events Identification of factors that may impact upon an individuals response to a life event e.g. age, circumstance, wealth, health Identification of different types of support: emotional, information and advice and practical help Analysis of sources of support: informal (family, friends, partners). Formal (professional caters and services and types of support they can provide). Voluntary (community groups, voluntary services and fath based organisations)	ASSESMENT CRITERIA: B2.D2 Assess how well tow individuals adapted to a life event and the role and value of support in this B2.M2 Compare the ways that two individuals adapted to a life event and the role that support played B2.P4 Explain how two individuals adapted to a life event using support B2.P3 Explain how two individuals B1.M4 Outline what support was given to two individuals B1.M4 Outline what support was given to two individuals experiencing a life event B.1M3 Outline the impact of a life event on the development of two individuals B1.P4 Identify sources of support that were available to two individuals experiencing a life event B1.P3 Identify relevant information about a life event experienced by two individuals	negative affects of exercise upon PIES wellbeing Understanding of the causes and consequences of
AOs	COMPONENT 1 - A1	COMPONENT 1 - A2	COMPONENT 1 - A1 and A2	COMPONENT 1 - B1 and B2	COMPONENT 2 - B1 and B2	Component 3 - A1
Common Misconce ptions	of disease not holistic.	Development occurs in isolation in each specific category. Childrens development in one aspect does not impact development in another area e.g. failure to recognise that limited socialisation in childhood may lead to delays in language development (intellectual) Failure to distinguish between acute and chronic illness Genetic diseases are communicable in the same way as viral / bacterial infections	As for half term 1 and half term 2	All individuals react to life events in the same way All life events are unexpected / all life events are expected There are no positive outcomes of imprisonment, bereavement, school exclusion, redundancy etc All sources of support must come from professionals (i.e. formal) All online content is reputable	As for half term 3	Addiction can be behavioural and not just substance. Only certain people can develop an addiction, it is not a real illness Rates of growth and development are determined by genetic inheritance and not lifestyle factors All illnesses can be cured with medication Age is the only factor that influences the likelihood of developing illness / disease

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September - June	Half term 1	Half term 2	Half term 3	Half term 4	Half term 4 / 5	Half term 6
Year 11	C2					
	INTERPRETING HEALTH C RS	INTERPRETING HEALTH INDICATORS	PERSON CENTRED HEALTH AND WELLBEING	Health and Social Care Services and Values	<u>B1</u>	
	B1 - Physiological indicate.	B2 - Lifestyle indicators	IMPROVEMENT PLANS	A1 (2)	Demonstrate care values and review own practice	
1	Health as an holitic concept.	Use of current lifestyle data to assess population health and	<u>C2</u>	Primary, secondary and	•	
	The importance of accurate measurement technique and	wellbeing	Obstacles to implementing plans	Alled health Professionals	<u>B2</u>	
ļi ļi	interpretation of result in numerical and grpahical format	Interpretation and analysis of lifestyle data on smoking,	Obstacles to implementing plans	Alled health Professionals	Reviewing own application of care values	
		alcohol and inactivity	Emotional / Psychological obstacles	Services for Children and Young People	Assessment Practice and completion of formal	
	Understanding of the impact of exercise on an individuals pulse rate and why having a short recovery after exercise is a good indicator of positive physical health and wellbeing	<u>C1</u>	Time constraints	Services for adults or children with specific needs	assignment	
		The importance of a person-centred approach	Availability of resources	Services for older adults		
	Analysis of measurable health indicators (Pulse, BMI, BP and Peak Flow)	Recommended actions to improve health and wellbeing	Unachievable targets	Informal social care	C2	
	The use of physiological measurements to diagnose /	Short and long term targets	Lack of support	A2		
	monitor disease	onor and long term targets	Lack of support	Physical, sensory, social, cultural and psychological		
		Sources of support	Ability/disability and addiction	barriers. Language, geographical, intellectual resource and financial barriers		
		Assessment technique	Barriers to accessing identified services	Assessment Practice		
		Completion and review of pr. 63 ssment questions	Assessment technique	Assessment Flactice		
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			Completion and review of practice assessment questions			
	Reduction and Holism	Reduction and Holism	Reduction and Holism	Reduction and Holism	Reduction and Holism	
	Interpretation and analysis of numerical and lifestyle data	Interpretation and analysis of numerical and lifestyle data	Interpretation and analysis of numerical and lifestyle data	Interpretation and analysis of numerical and lifestyle data	Interpretation and analysis of numerical and lifestyle data	
	Individualism	Individualism	Individualism	Individualism	Individualism	
Concepts						
	Team working	Team working	Team working	Team working	Team working	
	Strength based, solution focussed approach	Strength based, solution focussed approach	Strength based, solution focussed approach	Strength based, solution focussed approach	Strength based, solution focussed approach	
	INTERPRETING HEALTH INDICATORS		PERSON CENTRED HEALTH AND WELLBEING		Understanding the importance of:	
	B1 - Physiological indicators		IMPROVEMENT PLANS	HEALTH AND SOCIAL CARE SERVICES AND	Empowerment and promoting independence	
	Identification of the important indicators of health and understanding of the	INTERPRETING HEALTH INDICATORS	<u>C2</u>	VALUES	Resepct for others Maintaining confidentiality	
	importance of accurate measurement technique and interpretation of result	B2 - Lifestyle indicators	<u> </u>	Identification of a wide range of health and social care	Preserving dignity	
	Understanding of the impact of exercise on an individuals pulse rate and explanation of why having a short recovery time after exercise is a good	Donation to be a second of the data interest the second or a built	Understanding and application of the KISS rule and the	services	Effective communication	
	indicator of physical health and wellbeing	Practice to become skilful in data interpretation and analysis	benefits of SMART targets	Identification and analysis or potential barriers to	Safeguarding and duty of care Promoting anti-discriminatory practice	
	Analysis of blood pressure measurements to identify normal / abnormal ranges. Understanding of the risk associated with high/ low bp produce a	Understanding that lifestyle choices impact positively and	Understanding of how lack of motivations, low self-esteem	accessing appropriate services	Applying care values in a compassionate way	
	leaflet that includes information on what BP is, the risks of abnormal BP (low and high)	negativelt on current and future health	and acceptance of current state can represent emotional barriers to success	Understanding of how potentail barriers can be	Opportunity to practice application of care values	
	Understanding of Peak flow measurements and ability to interpret graphical data. Understanding of how peak flow measurements can be utilised to	Understanding of health promotion to empower individuals		overcome		
What is needed to master	diagnose / monitor disease	and enable them to make informed decisions	Understanding of available sources of support	Opporunties to apply knowledge to contextual examples	Understanding of the importance of making mistakes, reviewing own application of care values, receiving	
the knowledge	Ability to accurately interpret BMI data in grpahical and numerical formal and identification of risks of high / low BMI	Regular opportunities for knowledge recall and application	Understanding of potential obstacles to implementing health	and practice role play	and responding positively to feedback to improve	
	Understanding of how published guidelines are used to interpret health indicators and limitations of reliance on limited data		and wellbeing improvement plans and identification of		personal practice and service user outcomes	
	marcaro and miniduotis of felidice of milited data	Completion of past paper questions to improve response technique, showcase success and highlight areas for	strategies to overcome them	ASSESSMENT CRITERIA AS PER AUTHORISED ASSIGNMENT BRIEF	ASSESSMENT CRITERIA AS PER AUTHORISED	
		development	Completion of past paper questions independently to		ASSIGNMENT BRIEF	
			improve response technique and highlight any areas that still require development			
			Todal o do totophione			
AOs	C3 B1	C3 B2	C3 B2 and B3	C2 A1 and A2	C2 B1 and B2	
I	Hoolith as the absence of disease	Health promotion focuses only on physical wellbeing	Vague and overly ambitious targets without measure, time frame	Health Care Professionals are only Dr, Nurse etc - failure to recognise importance of allied health	Mistakes are failure rather than a learning opportunity	
	Health as the absence of disease	Nicotine / alcohol are not addictive and perception of positive		professionals, variety of services	Lack of confidence in ability to participate in role play	
	Ilness impacts physical health only	impact only	Lack of utilisation of a 'person centred approach'	Failure to recognise potential barrier within contextual	based assessment activities	
Common	Over reliance on numerical data in sisolation - no regard for	Poor exam technique - failure to read questions properly and	Ignorance of an individuals needs, wishes and circumstances			
Misconceptions	clincial judgement / other sources of informations	identify specified impact e.g. (on specific aspect of	- non personalised plan with unachievable targets	impact / importance		
	Physiological measurements can only measure immediate health	wellbeing)	Poor exam technique - rushed part of the paper 50% of			
	and do not indicate absence / progression of disease		exam attainment			
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