

Pearson BTEC
International Level 3 in

Health and Social Care

L3

Specification

First teaching from September 2026

Issue 2

Pearson BTEC International Level 3 Qualifications in Health and Social Care

Specification

First teaching September 2026

First certification from 2028

Issue 2

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This specification is Issue 2. We will inform centres of any changes to this issue.
The latest issue can be found on our website.

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Summary of changes to Pearson BTEC International Level 3 Qualifications in Health and Social Care specification Issue 2

Summary of changes made between previous issue and this issue	Page number
Pearson Set Assignments (PSAs) for internally assessed units will be released on an annual basis for each assessment window. Centres must use the PSA specified for the relevant assessment series. This approach supports the consistent delivery, quality assurance and management of assessment materials across all international markets, while ensuring the validity, reliability and comparability of learner outcomes.	24 to 127

If you need further information on these changes or what they mean, please contact us via our website at: qualifications.pearson.com/en/support/contact-us.html.

Welcome

With a track record built over 40 years of student success, our BTEC International Level 3 qualifications are recognised internationally by governments, industry and higher education. BTEC International Level 3 qualifications allow students to progress to the workplace – either directly or via study at a higher level. Over 100,000 BTEC students apply to university every year. Their Level 3 BTECs, either on their own or in combination with A Levels, are accepted by UK and international universities, and higher-education institutes for entry to relevant degree programmes.

Why are BTECs so successful?

BTECs embody a fundamentally student-centred approach to the curriculum, with a flexible, unit-based structure and knowledge applied through assignments. They enable the holistic development of the practical, interpersonal and thinking skills required to succeed in higher education and employment.

When creating these BTEC Internationals we focused on the skills and personal attributes needed to navigate the future, and have worked with many higher education providers, professional bodies, colleges and schools to ensure that their needs are met. Employers are looking for future employees with a thorough grounding in the latest industry requirements and work-ready skills such as critical thinking and problem solving. Higher education needs students who have experience of research, extended writing and meeting deadlines.

We have addressed these requirements by:

- Facilitating and guiding the development of transferable skills through the design and delivery of the qualifications, using a holistic and practical framework which is based on recent research into the most critical skills needed to navigate the future. This Transferable Skills Framework has been used to embed transferable skills in the qualifications where they naturally occur and also to signpost opportunities for delivery and development as a part of the wider BTEC learning experience.
- Supporting the delivery of Sustainability Education and Digital Skills development naturally through the content design of the qualifications. Mapping is provided for each qualification to identify where the opportunities for teaching and learning exist.
- Updating sector-specific content to ensure it is relevant and future-facing.
- Implementing a consistent approach to assessment to better engage students, make the qualifications more accessible for them and more manageable for centres to deliver.

We are providing a wealth of support, both resources and people, to ensure that students and their teachers have the best possible experience during their course. See *Section 5* for details of the support we offer.

Collaborative development

Students who complete their BTEC International Level 3 qualification in Health and Social Care aim to go on to employment, often via the stepping stone of higher education. It was, therefore, essential that we developed these qualifications in close collaboration with experts from universities and with the providers who will be delivering the qualifications. We engaged experts in the development of these qualifications to ensure that the content meets providers' needs and gives students quality preparation to help them progress. We are grateful to all the universities and further-education lecturers, teachers and other individuals who have generously shared their time and expertise to help us develop these new qualifications.

Higher-education providers that have worked with us include:

- Luminus Technical University College
- Nazarene Theological College
- NPTC Group.

Universities have provided letters of support confirming that these qualifications meet their entry requirements. The letters can be viewed on our website: qualifications.pearson.com.

A word to students

Today's BTEC Internationals will require commitment and hard work, as you would expect of the most respected applied learning qualification in the world. You will have to complete a range of units, be organised, take some assessments that we will set and your teachers will mark, and undertake practical tasks and assignments. But you can feel proud to achieve a BTEC because, whatever your plans in life – whether you decide to study further or go on to work – your BTEC International will be your passport to success in the next stage of your life.

Good luck and we hope you enjoy your course.

Contents

1 Introduction 1

Why choose Pearson BTEC International Level 3 Qualifications in Health and Social Care? 1

Total Qualification Time 2

Structures of the qualifications at a glance 5

Qualification and unit content 7

Assessment 7

Pearson Set Assignment (PSA) units 7

Internally assessed units 8

Language of assessment 9

Grading for units and qualifications 10

Preparing students for the future 11

Transferable skills 11

Digital skills 12

Sustainability skills 12

2 Qualification purpose 13

Pearson BTEC International Level 3 Qualifications in Health and Social Care 13

Who are these qualifications for? 13

Which size qualification to choose? 13

What do these qualifications cover? 13

What could these qualifications lead to? 14

3 Structure 16

Qualification structures 16

4 Units 25

Understanding your units 25

Index of units 29

Unit 1: Human Lifespan Development 31

Unit 2: Anatomy and Physiology for Health and Social Care 47

Unit 3: Promoting Public Health 57

Unit 4: Principles of Safe Practice in Health and Social Care 69

Unit 5: Enquiries into Current Research in Health and Social Care 81

Unit 6: Psychological Perspectives 93
Unit 7: Infection Prevention and Control 105
Unit 8: Sociological Perspectives 119
Unit 9: Principles of Effective Care 131
Unit 10: Physiological Disorders and their Care 149
Unit 11: Supporting Individuals with Additional Needs 163
Unit 12: Microbiology for Health Science 177
Unit 13: Policy in Health and Social Care 189
Unit 14: Caring for Individuals with Dementia 201
Unit 15: Assessing Children's Development Support Needs 215
Unit 16: Nutritional Health 227
Unit 17: Understanding Mental Wellbeing 241
Unit 18: Genetics 255
Unit 19: Biomedical Science 267
Unit 20: Biochemistry for Health 277
Unit 21: Complementary Therapies for Health and Social Care 289
Unit 22: Health Psychology 301
Unit 23: Work Experience in Health and Social Care 313

5 Planning your programme 325

Is there a student entry requirement? 325
Supporting you in planning and implementing your programme 325
Using Pearson Progress to support the planning, delivery and management of internal assessments 326
Training and support from Pearson 326

6 Understanding the qualification grade 328

Awarding and reporting for the qualification 328
Eligibility for an award 328
Awarding the qualification grade 328
Points available for units 329
Claiming the qualification grade 329
Calculation of the qualification grade 330
Example grading tables 331

Appendix 1 Glossary of terms used for internally assessed units 339

Appendix 2 Transferable Skills framework 342

Appendix 3 Digital Skills framework 347

Appendix 4 Sustainability framework 349

1 Introduction

Why choose Pearson BTEC International Level 3 Qualifications in Health and Social Care?

We've listened to feedback from all parts of the Health and Social Care subject community, including higher education. We've used this opportunity of curriculum change to redesign qualifications so that they reflect the demands of a truly modern and evolving Health and Social Care environment – qualifications that enable your students to apply themselves and give them the skills to succeed in their chosen pathway.

The units focus on developing knowledge, understanding and practical skills relevant to health and social care as applied to the modern world. Key features include hands-on research tasks, planning work, and reflective practice. Assessments are varied and designed to test both technical proficiency and critical thinking. Evidence of achievement can be through written reports, presentations, peer reviews, and/or live demonstrations. Each unit encourages students to apply concepts to real-world scenarios, fostering deeper understanding. Assessment also emphasises communication, planning and evaluation, aligning with higher education and sector expectations.

Total Qualification Time

Pearson specifies a total number of hours that it is estimated students will require to complete and show achievement for the qualification: this is the Total Qualification Time (TQT). Within TQT, Pearson identifies the number of Guided Learning Hours (GLH) that we estimate a centre delivering the qualification might provide. Guided learning means activities, such as lessons, tutorials, online instruction, supervised study and giving feedback on performance, that directly involve teachers and assessors in teaching, supervising and invigilating students. Guided learning includes the time required for students to complete internal assessment under supervised conditions.

In addition to guided learning, other required learning directed by teachers or assessors will include private study, preparation for assessment, and undertaking assessment when not under supervision, such as preparatory reading, revision and independent research.

BTEC Internationals have been designed around the number of hours of guided learning expected. Each unit in the qualification has a GLH value of 60. There is then a total GLH value for the qualification.

Each qualification has a TQT value. This may vary within sectors and across the suite depending on the nature of the units in each qualification and the expected time for other required learning.

The following table shows the qualifications in this sector and their GLH and TQT values.

Qualification title	Size and structure	Summary purpose
Pearson BTEC International Level 3 Certificate in Health and Social Care	180 GLH (30 Credits) (258 TQT) Equivalent in size to 0.5 of an International A Level. Three units of which one is mandatory and assessed by a Pearson Set Assignment. Mandatory content (33%).	The Certificate is for students who want an introduction to the sector through applied learning and for whom an element of health and social care would be complementary. The qualification supports progression to higher education as part of a programme of study that includes other appropriate BTEC International Level 3 qualifications or International A Levels.

Qualification title	Size and structure	Summary purpose
Pearson BTEC International Level 3 Extended Certificate in Health and Social Care	360 GLH (60 Credits) (524 TQT) Equivalent in size to one International A Level. Six units of which three are mandatory, two are assessed by a Pearson Set Assignment. Mandatory content (50%).	The Extended Certificate is for students who are interested in learning about the health and social care sector alongside other fields of study, with a view to progressing to a wide range of higher education courses, not necessarily in health and social care -related subjects. The qualification is designed to be taken as part of a programme of study that includes other appropriate BTEC International Level 3 qualifications or International A Levels.
Pearson BTEC International Level 3 Foundation Diploma in Health and Social Care	540 GLH (90 Credits) (798 TQT) Equivalent in size to 1.5 International A Levels. Nine units of which five are mandatory, three are assessed by a Pearson Set Assignment. Mandatory content (56%).	The Foundation Diploma is for students who want to study health and social care as a one-year, full-time course, or for those wanting to take it alongside another area of complementary or contrasting study as part of a two-year, full-time study programme. The qualification would support progression to higher education if taken as part of a programme of study that included other BTEC International Level 3 qualifications or International A Levels.

Qualification title	Size and structure	Summary purpose
Pearson BTEC International Level 3 Diploma in Health and Social Care	720 GLH (120 Credits) (1057 TQT) Equivalent in size to two International A Levels. Twelve units of which seven are mandatory, five are assessed by a Pearson Set Assignment. Mandatory content (58%).	The Diploma is for students who want to study health and social care as the main element alongside another area of complementary or contrasting study as part of a two-year, full-time study programme. The qualification would support progression to higher education if taken as part of a programme of study that included other BTEC International Level 3 qualifications or International A Levels.
Pearson BTEC International Level 3 Extended Diploma in Health and Social Care	1080 GLH (180 Credits) (1559 TQT) Equivalent in size to three International A Levels. Eighteen units of which eleven are mandatory, eight are assessed by a Pearson Set Assignment. Mandatory content (61%).	The Extended Diploma is a full-time course for students who want to study health and social care as the main focus of a two-year, full-time study programme. The qualification would support progression to higher education in its own right. This qualification could also directly lead to employment in Level 3 roles in the health and social care sector or via higher-education health and social care courses.

Structures of the qualifications at a glance

This table shows all the units and the qualifications to which they contribute. The full structure for these Pearson BTEC International Level 3 Qualifications in Health and Social Care is shown in *Section 3 Structure*. **You must refer to the full structure to select units and plan your programme.**

Key

Pearson Set Assignment units are shown in bold

M	**Mandatory units**	O	**Optional units**

Unit	Unit size (GLH)	Certificate (180 GLH)	Extended Certificate (360 GLH)	Foundation Diploma (540 GLH)	Diploma (720 GLH)	Extended Diploma (1080 GLH)
1 Human Lifespan Development	**60**	**M**	**M**	**M**	**M**	**M**
2 Anatomy and Physiology for Health and Social Care	**60**	**O**	**M**	**M**	**M**	**M**
3 Promoting Public Health	**60**	**O**	**O**	**M**	**M**	**M**
4 Principles of Safe Practice in Health and Social Care	**60**	**O**	**O**	**O**	**M**	**M**
5 Enquiries into Current Research in Health and Social Care	**60**				**M**	**M**
6 Psychological Perspectives	**60**	**O**	**O**	**O**	**O**	**M**
7 Infection Prevention and Control	**60**	**O**	**O**	**O**	**O**	**M**
8 Sociological Perspectives	**60**	**O**	**O**	**O**	**O**	**M**
9 Principles of Effective Care	**60**		**M**	**M**	**M**	**M**
10 Physiological Disorders and their Care	**60**			**M**	**M**	**M**

Unit	Unit size (GLH)	Certificate (180 GLH)	Extended Certificate (360 GLH)	Foundation Diploma (540 GLH)	Diploma (720 GLH)	Extended Diploma (1080 GLH)
11 Supporting Individuals with Additional Needs	60				O	M
12 Microbiology for Health Science	60	O	O	O	O	O
13 Policy in Health and Social Care	60				O	O
14 Caring for Individuals with Dementia	60					O
15 Assessing Children's Development Support Needs	60			O	O	O
16 Nutritional Health	60		O	O	O	O
17 Understanding Mental Wellbeing	60			O	O	O
18 Genetics	60				O	O
19 Biomedical Science	60					O
20 Biochemistry for Health	60		O	O	O	O
21 Complementary Therapies for Health and Social Care	60					O
22 Health Psychology	60					O
23 Work Experience in Health and Social Care	60				O	O

Qualification and unit content

Pearson has developed the content of the new BTEC Internationals in collaboration with representatives from higher education and relevant professional bodies. In this way, we have ensured that content is up to date and that it includes the knowledge, understanding, skills and attributes required in the sector.

Centres should ensure that delivery of content is kept up to date. Some of the units within the specification may contain references to legislation, policies, regulations and organisations, which may not be applicable in the country you deliver this qualification in, or which may have gone out-of-date during the lifespan of the specification. In these instances, it is possible to substitute such references with ones that are current and applicable in the country you deliver in, subject to confirmation by your Standards Verifier.

Assessment

Assessment is specifically designed to fit the purpose and objective of the qualification. It includes a range of assessment types and styles suited to vocational qualifications in the sector. All assessment is internal but some mandatory units have extra controls on assessment and are assessed using Pearson Set Assignments.

Pearson Set Assignment (PSA) units

Some units in these qualifications are assessed using a Pearson Set Assignment Brief (PSAB), which is set by Pearson and is marked by teachers. The teachers will make grading decisions based on the requirements and supporting guidance given in the units.

Pearson Set Assignment units are subject to external standards verification processes common to all BTEC units. By setting the assignment for some units, we can ensure that all students take the same set of assessments for a specific unit. For further information on preparing for Pearson Set Assignments, see the *Pearson BTEC International Level 3 Qualifications Supplementary Information* document which is available on our website.

Internally assessed units

All units in these qualifications are internally assessed and subject to external standards verification. In some units, Pearson will set the assessments using Pearson Set Assignments, which are marked by you. In other units, you set and assess the assignments that provide the final summative assessment for each unit, using the examples and support that Pearson provides. Before you assess you will need to become an approved centre, if you are not one already.

You will need to prepare to assess using the guidance in the *Pearson BTEC International Level 3 Qualifications Supplementary Information* document, which is available on our website.

For units where there is no Pearson Set Assignment, you select the most appropriate assessment styles according to the learning set out in the unit. This ensures that students are assessed using a variety of styles to help them develop a broad range of transferable skills. Students could be given opportunities to:

- write up the findings of their own research
- use case studies to explore complex or unfamiliar situations
- carry out projects for which they have choice over the direction and outcomes
- demonstrate practical and technical skills using appropriate tools/processes, etc.

For these units, Pearson will provide an Authorised Assignment Brief (AAB) that you can use.

You will make grading decisions based on the requirements and supporting guidance given in the units. Where a student has not achieved their expected level of performance for an assignment, they may be eligible for one resubmission of improved evidence for each assignment submitted if authorised by the Lead Internal Verifier.

To ensure any resubmissions are fairly and consistently implemented for all students, the Lead Internal Verifier can only authorise a resubmission if certain conditions are met. If the Lead Internal Verifier does authorise a resubmission, it must be completed within 15 working days of the student receiving the results of the assessment.

Feedback to students can only be given to clarify areas where they have not achieved expected levels of performance. Students cannot receive any specific guidance or instruction about how to improve work to meet assessment criteria or be given solutions to questions or problems in the tasks.

If a student has still not achieved the targeted pass criteria following the resubmission of improved evidence for an assignment, the Lead Internal Verifier may authorise, under exceptional circumstances, one retake opportunity to meet the required pass criteria. The retake can be of a task or subset of the assignment brief that is of evidence in a new or revised form. The deadline for submission of the retake must fall within the same academic year.

Language of assessment

Assessment of the units for these qualifications will be available in English but can be translated as necessary. A student taking the qualifications may be assessed in sign language where it is permitted for the purpose of reasonable adjustment.

For information on reasonable adjustments see the *Pearson BTEC International Level 3 Qualifications Specification Supplementary Information* document, which is available on our website.

Grading for units and qualifications

Achievement in a qualification requires a demonstration of depth of study in each unit, assured acquisition of a range of practical skills required for progression to higher education and successful development of transferable skills. Students achieving a qualification will have completed all units.

Units are assessed using a grading scale of Distinction (D), Merit (M), Pass (P) and Unclassified (U). All mandatory and optional units contribute proportionately to the overall qualification grade.

BTEC International qualifications are graded using a scale of P to D*, **or** PP to D*D*, **or** PPP to D*D*D* depending on the size of the qualification. Please see *Section 6* for more details. The relationship between qualification grading scales and unit grades will be subject to regular review as part of Pearson's standards monitoring processes on the basis of student performance and in consultation with key users of the qualification.

Preparing students for the future

Transferable skills

Recent future skills reports have highlighted the growing importance of transferable skills for students to succeed in their careers and lives in this fast-changing world.

Following research and consultation with FE educators and higher education institutions, Pearson has developed a Transferable Skills framework to facilitate and guide the development of transferable skills through these qualifications. The framework has four broad skill areas, each with a cluster of transferable skills as shown below:

1. **Managing yourself**: (1) Taking personal responsibility; (2) Personal strengths and resilience; (3) Career orientation planning; (4) Personal goal setting
2. **Effective learning**: (1) Managing own learning; (2) Continuous learning; (3) Secondary research skills; (4) Primary research skills
3. **Interpersonal skills**: (1) Written communication; (2) Verbal and non-verbal communications; (3) Teamwork; (4) Cultural and social intelligence
4. **Solving problems**: (1) Critical thinking; (2) Problem solving; (3) Creativity and innovation.

Each transferable skill has a set of descriptors that outline what achievement of the skill looks like in practice. Each unit in these qualifications will show whether a transferable skill has been:

1. Fully embedded through the design of the teaching and learning content and assessment of the unit. Skills that are embedded are 'naturally occurring' in that they are inherent to the unit content and do not require extension activities to deliver.
2. Signposted as an opportunity for delivery and development and would require extension activities to deliver.

Units will show a summary of the transferable skills that have been embedded or signposted and *Appendix 2* shows the descriptors for each skill across all the skill clusters.

More information on the framework, its design and relevance for student progression is available in the *BTEC Transferable Skills Guide for Teachers.*

Digital skills

Digital skills are required in every industry as well as in everyday life and, with the acceleration of automation and AI in industry, it is critical for students to understand how digital technologies are relevant and applied in the context of the sector they are studying.

With this in mind, we have used the *Digital Skills Framework* published by the Institute for Apprenticeships and Technical Education (IFATE) as a frame of reference to identify opportunities for the delivery and development of digital skills in this qualification.

The Digital Skills framework for these qualifications has five categories with specific digital characteristics that apply in varying extent across sectors:

1. **Problem solving** – The use of digital tools to analyse and solve problems
2. **Digital collaboration and communication** – Using digital tools to communicate and share information with stakeholders
3. **Transacting digitally** – Using digital tools to set up accounts and pay for goods/services
4. **Digital security** – Identify threats and keep digital tools safe
5. **Handling data safely and securely** – Follow correct procedures when handling personal and organisational data.

Opportunities to develop these digital skills are identified where they are relevant and appropriate to a sector, meaning:

- where they naturally occur
- where they add no assessment burden
- where they will enhance a student's skills and knowledge in the sector.

Appendix 3 shows a mapping of the teaching and learning content to the five categories of the framework to show where opportunities to develop these digital skills exist in these qualifications.

Sustainability skills

To help students develop sustainability skills, practices and mindset, we have designed content in these qualifications, aligned to the *UNESCO Sustainable Development Goals* (17 SDGs), that are relevant and appropriate to the sector. The SDGs are the most common point of reference for content that addresses sustainability and provides a useful and pragmatic way of organising this content.

Sustainability knowledge and understanding may be included in the teaching and learning content but not directly assessed. Alternatively, it could be assessed – the approach chosen for each unit is based on the relevance of the sustainability skills, knowledge or understanding to the purpose and scope of the unit.

Appendix 4 shows a mapping of the teaching and learning content to the relevant SDGs to show where sustainability has been included in these qualifications.

2 Qualification purpose

Pearson BTEC International Level 3 Qualifications in Health and Social Care

In this section, you will find information on the purpose of these qualifications and how their design meets that purpose through the qualifications' objectives and structures.

Who are these qualifications for?

The Pearson BTEC International Level 3 qualifications in Health and Social Care are designed either for students in the 16–19 age group, who wish to pursue a career in health and social care via higher education to access graduate entry employment with businesses, or alternatively through junior employment.

Which size qualification to choose?

Choosing the most suitable size of qualification will depend on the student's broader programme of study. For example, a student who wishes to focus solely on health and social care may take the Diploma or Extended Diploma, while a student who selects a smaller qualification, such as the Certificate or Extended Certificate, may choose to combine it with qualifications from other sectors, to support their desired progression. Smaller qualifications are also suitable for students who are in employment and studying part-time.

Qualification structures have been designed to enable a student who starts with the smallest qualification to progress easily to the larger qualifications.

What do these qualifications cover?

The content of these qualifications has been designed to support progression to particular roles in health and social care, either directly into entry-level roles linked to these occupational areas or, more likely, via particular higher-education routes in the particular areas. The qualification content has been designed in consultation with employers, professional bodies and higher-education providers to ensure that the content is appropriate for the progression routes identified.

All students will be required to take mandatory content that is directly relevant to progression routes in all of the identified areas.

In addition, students take optional units that support the progression route identified in the qualification title. For example, students taking the qualification as part of a work-based learning qualification for health and social care could take units such as:

- Caring for Individuals with Dementia
- Nutritional Health
- Work Experience in Health and Social Care.

Students looking to follow a health studies route could take units such as:

- Microbiology for Health Science
- Genetics
- Biochemistry for Health.

Additionally, students could choose units that relate to a number of roles in the sector but which contribute to their understanding of those roles in a vocational context, such as:

- Understanding Mental Wellbeing
- Health Psychology.

What could these qualifications lead to?

These qualifications support progression to job opportunities in the health and social care at a variety of levels. Jobs available in these areas include:

- nursing
- social care
- physiotherapy
- occupational therapy
- speech and language therapy
- counselling.

These qualifications also support students who are following an applied science route. The jobs available to them will be based on their ability in the health and social care and will be supported by their achievement of this qualification.

After achieving this qualification, while students can progress directly to entry-level health and social care roles, it is likely that many will do so via higher study. These qualifications are recognised by higher education institutions worldwide and provides students with opportunities to progress into further and higher study across various areas within the health and social care sector. For example:

- Pearson BTEC Higher Nationals Counselling and Applied Psychology (2023)
- Pearson BTEC Higher Nationals Health and Social Care Practice (2025)
- Pearson BTEC Higher Nationals Healthcare Practice (2018) RQF
- Pearson BTEC Higher Nationals Social and Community Work (2018) RQF
- BSc (Hons) in Nursing
- BA (Hons) in Social Work

- BSc (Hons) in Physiotherapy
- BSc (Hons) in Occupational Therapy
- BSc (Hons) in Speech Therapy
- BA (Hons) in Health and Social Care.

NB: students should always check the entry requirements for degree programmes with the relevant higher education provider.

3 Structure

Qualification structures

The structures for the qualifications in this specification are:

- Pearson BTEC International Level 3 Certificate in Health and Social Care (180 GLH)
- Pearson BTEC International Level 3 Extended Certificate in Health and Social Care (360 GLH)
- Pearson BTEC International Level 3 Foundation Diploma in Health and Social Care (540 GLH)
- Pearson BTEC International Level 3 Diploma in Health and Social Care (720 GLH)
- Pearson BTEC International Level 3 Extended Diploma in Health and Social Care (1080 GLH).

Pearson BTEC International Level 3 Certificate in Health and Social Care (180 GLH)

Students must complete one mandatory unit and two optional units.

See *Section 6* for rules on qualification awarding.

Mandatory unit – students complete and achieve 1 unit

Unit number	Unit title	GLH	Type	How assessed
1	Human Lifespan Development	**60**	**Mandatory**	Set Assignment

Optional units – students complete 2 units

Unit number	Unit title	GLH	Type	How assessed
2	Anatomy and Physiology for Health and Social Care	**60**	**Optional**	Set Assignment
3	Promoting Public Health	**60**	**Optional**	Set Assignment
4	Principles of Safe Practice in Health and Social Care	**60**	**Optional**	Set Assignment

Unit number	Unit title	GLH	Type	How assessed
6	Psychological Perspectives	**60**	**Optional**	Set Assignment
7	Infection Prevention and Control	**60**	**Optional**	Set Assignment
8	Sociological Perspectives	**60**	**Optional**	Set Assignment
12	Microbiology for Health Science	**60**	**Optional**	Internal

Pearson BTEC International Level 3 Extended Certificate in Health and Social Care (360 GLH)

Students must complete three mandatory units and three optional units.

See *Section 6* for rules on qualification awarding.

Mandatory units – students complete and achieve all units

Unit number	Unit title	GLH	Type	How assessed
1	Human Lifespan Development	**60**	**Mandatory**	Set Assignment
2	Anatomy and Physiology for Health and Social Care	**60**	**Mandatory**	Set Assignment
9	Principles of Effective Care	**60**	**Mandatory**	Internal

Optional units – students complete 3 units

Unit number	Unit title	GLH	Type	How assessed
3	Promoting Public Health	**60**	**Optional**	Set Assignment
4	Principles of Safe Practice in Health and Social Care	**60**	**Optional**	Set Assignment
6	Psychological Perspectives	**60**	**Optional**	Set Assignment
7	Infection Prevention and Control	**60**	**Optional**	Set Assignment
8	Sociological Perspectives	**60**	**Optional**	Set Assignment
12	Microbiology for Health Science	**60**	**Optional**	Internal
16	Nutritional Health	**60**	**Optional**	Internal
20	Biochemistry for Health	**60**	**Optional**	Internal

Pearson BTEC International Level 3 Foundation Diploma in Health and Social Care (540 GLH)

Students must complete five mandatory units and four optional units.

See *Section 6* for rules on qualification awarding.

Mandatory units – students complete and achieve all units

Unit number	Unit title	GLH	Type	How assessed
1	Human Lifespan Development	**60**	**Mandatory**	Set Assignment
2	Anatomy and Physiology for Health and Social Care	**60**	**Mandatory**	Set Assignment
3	Promoting Public Health	**60**	**Mandatory**	Set Assignment
9	Principles of Effective Care	**60**	**Mandatory**	Internal
10	Physiological Disorders and their Care	**60**	**Mandatory**	Internal

Optional units – students complete 4 units

Unit number	Unit title	GLH	Type	How assessed
4	Principles of Safe Practice in Health and Social Care	**60**	**Optional**	Set Assignment
6	Psychological Perspectives	**60**	**Optional**	Set Assignment
7	Infection Prevention and Control	**60**	**Optional**	Set Assignment
8	Sociological Perspectives	**60**	**Optional**	Set Assignment
12	Microbiology for Health Science	**60**	**Optional**	Internal
15	Assessing Children's Development Support Needs	**60**	**Optional**	Internal
16	Nutritional Health	**60**	**Optional**	Internal
17	Understanding Mental Wellbeing	**60**	**Optional**	Internal
20	Biochemistry for Health	**60**	**Optional**	Internal

Pearson BTEC International Level 3 Diploma in Health and Social Care (720 GLH)

Students must complete seven mandatory units and five optional units.

See *Section 6* for rules on qualification awarding.

Mandatory units – students complete and achieve all units

Unit number	Unit title	GLH	Type	How assessed
1	Human Lifespan Development	**60**	**Mandatory**	Set Assignment
2	Anatomy and Physiology for Health and Social Care	**60**	**Mandatory**	Set Assignment
3	Promoting Public Health	**60**	**Mandatory**	Set Assignment
4	Principles of Safe Practice in Health and Social Care	**60**	**Mandatory**	Set Assignment
5	Enquiries into Current Research in Health and Social Care	**60**	**Mandatory**	Set Assignment
9	Principles of Effective Care	**60**	**Mandatory**	Internal
10	Physiological Disorders and their Care	**60**	**Mandatory**	Internal

Optional units – students complete 5 units

Unit number	Unit title	GLH	Type	How assessed
6	Psychological Perspectives	**60**	**Optional**	Set Assignment
7	Infection Prevention and Control	**60**	**Optional**	Set Assignment
8	Sociological Perspectives	**60**	**Optional**	Set Assignment
11	Supporting Individuals with Additional Needs	**60**	**Optional**	Internal
12	Microbiology for Health Science	**60**	**Optional**	Internal
13	Policy in Health and Social Care	**60**	**Optional**	Internal

Unit number	Unit title	GLH	Type	How assessed
15	Assessing Children's Development Support Needs	**60**	**Optional**	Internal
16	Nutritional Health	**60**	**Optional**	Internal
17	Understanding Mental Wellbeing	**60**	**Optional**	Internal
18	Genetics	**60**	**Optional**	Internal
20	Biochemistry for Health	**60**	**Optional**	Internal
23	Work Experience in Health and Social Care	**60**	**Optional**	Internal

Pearson BTEC International Level 3 Extended Diploma in Health and Social Care (1080 GLH)

Students must complete 11 mandatory units and seven optional units.

See *Section 6* for rules on qualification awarding.

Mandatory units – students complete and achieve all units

Unit number	Unit title	GLH	Type	How assessed
1	Human Lifespan Development	**60**	**Mandatory**	Set Assignment
2	Anatomy and Physiology for Health and Social Care	**60**	**Mandatory**	Set Assignment
3	Promoting Public Health	**60**	**Mandatory**	Set Assignment
4	Principles of Safe Practice in Health and Social Care	**60**	**Mandatory**	Set Assignment
5	Enquiries into Current Research in Health and Social Care	**60**	**Mandatory**	Set Assignment
6	Psychological Perspectives	**60**	**Mandatory**	Set Assignment
7	Infection Prevention and Control	**60**	**Mandatory**	Set Assignment
8	Sociological Perspectives	**60**	**Mandatory**	Set Assignment
9	Principles of Effective Care	**60**	**Mandatory**	Internal
10	Physiological Disorders and their Care	**60**	**Mandatory**	Internal
11	Supporting Individuals with Additional Needs	**60**	**Mandatory**	Internal

Optional units – students complete 7 units

Unit number	Unit title	GLH	Type	How assessed
12	Microbiology for Health Science	**60**	**Optional**	Internal
13	Policy in Health and Social Care	**60**	**Optional**	Internal
14	Caring for Individuals with Dementia	**60**	**Optional**	Internal
15	Assessing Children's Development Support Needs	**60**	**Optional**	Internal
16	Nutritional Health	**60**	**Optional**	Internal
17	Understanding Mental Wellbeing	**60**	**Optional**	Internal
18	Genetics	**60**	**Optional**	Internal
19	Biomedical Science	**60**	**Optional**	Internal
20	Biochemistry for Health	**60**	**Optional**	Internal
21	Complementary Therapies for Health and Social Care	**60**	**Optional**	Internal
22	Health Psychology	**60**	**Optional**	Internal
23	Work Experience in Health and Social Care	**60**	**Optional**	Internal

Pearson Set Assignment units

This is a summary of the type and availability of Pearson Set Assignment units. For further information on preparing for Pearson Set Assignments, see the *Pearson BTEC International Level 3 Qualifications Supplementary Information* document which is available on our website.

Unit	Type	Availability
Unit 1: Human Lifespan Development	An assignment set by Pearson and marked by the centre. The advised period is 12 hours.	Two available for each series.
Unit 2: Anatomy and Physiology for Health and Social Care	An assignment set by Pearson and marked by the centre. The advised period is 12 hours.	Two available for each series.
Unit 3: Promoting Public Health	An assignment set by Pearson and marked by the centre. The advised period is 15 hours.	Two available for each series.
Unit 4: Principles of Safe Practice in Health and Social Care	An assignment set by Pearson and marked by the centre. The advised period is 12 hours.	Two available for each series.
Unit 5: Enquiries into Current Research in Health and Social Care	An assignment set by Pearson and marked by the centre. The advised period is 15 hours.	Two available for each series.
Unit 6: Psychological Perspectives	An assignment set by Pearson and marked by the centre. The advised period is 10 hours.	Two available for each series.
Unit 7: Infection Prevention and Control	An assignment set by Pearson and marked by the centre. The advised period is 12 hours.	Two available for each series.
Unit 8: Sociological Perspectives	An assignment set by Pearson and marked by the centre. The advised period is 10 hours.	Two available for each series.

4 Units

Understanding your units

The units in this specification set out our expectations of assessment in a way that helps you to prepare your students for assessment. The units help you to undertake assessment and quality assurance effectively.

This section explains how the units work. It is important that all teachers, assessors, internal verifiers and other staff responsible for the programme review this section.

Section	Explanation
Unit number	The number is in a sequence in the sector. Numbers may not be sequential for an individual qualification.
Unit title	This is the formal title that we always use and it appears on certificates.
Unit level	All units are at Level 3.
Unit type	This confirms that the unit is internal or assessed using a Pearson Set Assignment. See structure information in *Section 3 Structure* for full details.
GLH	Units have a Guided Learning Hours (GLH) value of 60. This indicates the numbers of hours of teaching, directed activity and assessment expected. It also shows the weighting of the unit in the final qualification grade.
Unit in brief	A brief formal statement on the content of the unit that is helpful in understanding its role in the qualification. You can use this in summary documents, brochures, etc.
Unit introduction	This is designed with students in mind. It indicates why the unit is important, how learning is structured, and how learning might be applied when progressing to employment or higher education.
Learning aims	These help to define the scope, style and depth of learning of the unit. You can see where students should be learning standard requirements ('understand') or where they should be actively researching ('investigate'). You can find out more about the verbs we use in learning aims in *Appendix 1*.

Section	Explanation
Summary of unit	This helps you to see the main content areas against the learning aims and the structure of the assessment at a glance.
Content	This sets out the required teaching content of the unit. Content is compulsory except where shown as 'e.g.'. Students should be asked to complete summative assessment only after the teaching content for the unit or learning aim(s) has been covered.
Assessment criteria	Each learning aim has Pass and Merit criteria. Each assignment has at least one Distinction criterion. A full glossary of terms used is given in *Appendix 1*. Distinction criteria represent outstanding performance in the unit. Some criteria require students to draw together learning from across the learning aims.
Transferable skills	This summarises the transferable skills present within the unit. The key helps to identify whether they are signposted but require additional assessment, embedded and achieved on completion, or not present in the unit.
Essential information for Pearson Set Assignment Brief (PSAB)	This shows a brief summary of the activities required for the mandatory Pearson Set Assignment Brief (PSAB). Centres must download and use the mandatory PSAB without alteration or contextualisation.
Essential information for assignments	This section gives you information to support the implementation of assessment. It is important that this is read carefully alongside the assessment criteria, as the information will help with interpretation of the requirements.
Further information for teachers and assessors	This gives you information to support the implementation of assessment. It is important that this is used carefully alongside the assessment criteria and assignment.
Resource requirements	Any specific resource requirements that you need to be able to teach and assess are listed in this section.
Essential information for assessment decisions	This information gives guidance for each learning aim or assignment of the expectations for Pass, Merit and Distinction standard. This section contains examples and essential clarification.

Section	Explanation
Links to other units	This shows you the main relationship between units. This can help you to structure your programme and make best use of materials and resources.

Index of units

Unit 1: Human Lifespan Development 31
Unit 2: Anatomy and Physiology for Health and Social Care 47
Unit 3: Promoting Public Health 57
Unit 4: Principles of Safe Practice in Health and Social Care 69
Unit 5: Enquiries into Current Research in Health and Social Care 81
Unit 6: Psychological Perspectives 93
Unit 7: Infection Prevention and Control 105
Unit 8: Sociological Perspectives 119
Unit 9: Principles of Effective Care 131
Unit 10: Physiological Disorders and their Care 149
Unit 11: Supporting Individuals with Additional Needs 163
Unit 12: Microbiology for Health Science 177
Unit 13: Policy in Health and Social Care 189
Unit 14: Caring for Individuals with Dementia 201
Unit 15: Assessing Children's Development Support Needs 215
Unit 16: Nutritional Health 227
Unit 17: Understanding Mental Wellbeing 241
Unit 18: Genetics 255
Unit 19: Biomedical Science 267
Unit 20: Biochemistry for Health 277
Unit 21: Complementary Therapies for Health and Social Care 289
Unit 22: Health Psychology 301
Unit 23: Work Experience in Health and Social Care 313

Unit 1: Human Lifespan Development

Level: 3

Unit type: Pearson Set Assignment

Guided learning hours: 60

Unit in brief

Students will understand human growth and development across life stages, the factors influencing development, and the role of health and social care professionals in promoting wellbeing.

Unit introduction

Understanding how humans grow and develop across their lifespan is essential for anyone entering the health and social care sector. This unit explores the physical, intellectual, emotional and social changes that occur from infancy through to late adulthood, helping you appreciate the complexity and uniqueness of individual development.

In this unit, you will learn how to explore the wide range of factors that influence development, including genetics, lifestyle choices, environmental conditions and social inequities. The unit also reflects modern issues such as digital health, mental wellbeing and the evolving roles of health and social care professionals in promoting holistic care.

By completing this unit, you will build a strong foundation for further study or employment in health and social care. You will develop transferable skills such as critical thinking, communication and empathy, which are essential for progression into higher education, apprenticeships or frontline care roles.

Learning aims

In this unit you will:

A Understand human growth and development across life stages

B Examine factors affecting human growth and development

C Explore health promotion and care across life stages.

Summary of unit

Learning aim	Key content areas	Assessment approach
A Understand human growth and development across life stages	**A1** Physical, intellectual, emotional and social development in infancy **A2** Physical, intellectual, emotional and social development in early childhood **A3** Physical, intellectual, emotional and social development in adolescence **A4** Physical, intellectual, emotional and social development in early adulthood **A5** Physical, intellectual, emotional and social development in middle adulthood **A6** Physical, intellectual, emotional and social development in late adulthood	This unit is assessed through a Pearson Set Assignment.
B Examine factors affecting human growth and development	**B1** Genetic factors **B2** Lifestyle factors **B3** Health inequities **B4** Environmental, economic and occupational influences	

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Learning aim	Key content areas	Assessment approach
C Explore health promotion and care across life stages	**C1** Common health conditions at different life stages **C2** Health promotion and prevention strategies **C3** Roles of health and social care professionals **C4** Multidisciplinary and person-centred care	This unit is assessed through a Pearson Set Assignment.

Content

The essential content is set out under content areas. Students must cover all specified content before the assessment.

Learning aim A: Understand human growth and development across life stages

Students will explore holistic development. They will understand the relationship of the different areas of development and the effect they have on each other.

A1 Physical, intellectual, emotional and social development in infancy – (birth to 2 years)

- Physical: growth – height and weight; the development of gross motor skills: holding head up, sitting up, crawling, walking; the development of fine motor skills: using thumb and finger to pick up items; meeting milestones and expected development.
- Intellectual: learning about environment through interaction with it; recognising familiar faces; communicating with others and starting to talk; manipulating objects.
- Emotional: importance of bonding and attachment with primary caregivers; theories of attachment – Bowlby and Ainsworth.
- Social: relationships with caregivers, starting to interact with others.

A2 Physical, intellectual, emotional and social development in early childhood (3 to 8 years)

- Physical: changes to growth, height and weight; gross motor skills: walking on tiptoe, hopping and skipping; fine motor skills: dressing and undressing, self-undoing/doing up buttons/laces.
- Intellectual: increase in vocabulary, talking in sentences; counting; increase in problem solving; knowing basic information about self.
- Emotional: managing own emotions, understanding others' emotions, development of self.
- Social: developing friendships with other children.

A3 Physical, intellectual, emotional and social development in adolescence (9 to 18 years)

- Physical: the changes surrounding puberty – changes to primary and development of secondary sexual characteristics; hormonal changes.
- Intellectual: abstract thinking; reasoning.
- Emotional: developing own identity and self-concept, including self-image and self-esteem; developing intimate relationships.
- Social: friendships and the effects of peer pressure on social development; social media influence on identity, mental health and behaviour, cyberbullying, online relationships, digital literacy; developing independence; peer influences on behaviour.

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A4 Physical, intellectual, emotional and social development in early adulthood (19 to 45 years)

- Physical: physical maturity: physical strength peaks, fertility, brain growth until early twenties; pregnancy and lactation occur; synaptic pruning; perimenopause – oestrogen levels decrease, causing the ovaries to stop producing an egg each month.
- Intellectual: new intellectual skills develop relating to further/higher education and work.
- Emotional: long-term intimate relationships; changes to self-concept, including self-esteem and self-image related to lifestyle (work, family); bonding and attachment with own family/guardians.
- Social: independent from family, groups of friends.

A5 Physical, intellectual, emotional and social development in middle adulthood (46 to 69)

- Physical: menopause, to include: hot flushes, night sweats, cessation of menstruation and vaginal dryness; start of physical strength declining, vision and hearing loss; changes related to lifestyle factors, to include: weight gain, joint pain related to wear and tear; men's health awareness (e.g. andropause, prostate health) and mental health in midlife, including burnout and work-life balance.
- Intellectual: improvement in verbal and reasoning skills from applied learning.
- Emotional: re-evaluation of priorities; contributing to the next generation, sense of emptiness as children grow up; emotional factors relating to menopause including changes to mood and libido.
- Social: relationships with peers at work; more social lifestyle with no children/early retirement/retirement; limited social life due to work pressures; changing roles – becoming a grandparent.

A6 Physical, intellectual, emotional and social development in late adulthood (70+ years)

- Physical: lung capacity reduces, arteries and heart muscle thicken, brain cells lose some functioning, falls from reduced mobility.
- Intellectual: ability to learn new skills (though may take longer), short-term memory less easily recalled, wisdom and creativity remain.
- Emotional: calmer, feeling alone, feeling younger than age, feelings of frailty.
- Social: more opportunities to meet friends due to retirement, meeting new people as taking on new activities; reduction in social circle of peers through this life stage; digital inclusion for older adults, such as using technology to maintain social connections and access services.

Learning aim B: Examine factors affecting human growth and development

B1 Genetic factors

- Predispositions to health/ill health: to include cardiovascular disease, breast and prostate cancers.
- Disorders: Huntington's disease, cystic fibrosis, sickle cell anaemia.

B2 Lifestyle factors

- Diet and weight management.
- Level of exercise.
- Use or not of substances and prescription drug misuse, emerging concerns and health impacts.
- Quality of sleep.
- Oral health.
- Pregnancy: factors impacting foetal development and premature birth, including pre-natal substance use/misuse, diet.

B3 Health inequities

- Health inequities according to WHO.
- Health inequities to include:
  - difference in life expectancy across different socio-economic groups
  - prevalence of mental health difficulties across socio-economic groups/gender/race and ethnicity, neurodiversity (e.g. autism, ADHD) and intersectionality in mental health (e.g. race, gender)
  - access to health services and differences of experience in healthcare – race and ethnicity, learning disabilities, gender, geographical location
  - discrimination.

B4 Environmental, economic and occupational influences

- Environmental: exposure to pollution and unsafe housing conditions, asthma, tuberculosis, accidents.
- Economic: income and employment status, impact on health.
- Occupational related health: chronic obstructive pulmonary disorder (COPD), musculoskeletal problems, stress and anxiety, shift work.

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Learning aim C: Explore health promotion and care across life stages

C1 Common health conditions at different life stages

Students will explore the prevalence of the stated health conditions within the following life stages.

- Infancy and early childhood: flu, chicken pox, ear infections, meningitis, conjunctivitis, speech development and problems, dental caries (tooth decay).
- Adolescence: substance misuse, sexual health.
- Early and middle adulthood: stress, depression and anxiety at work, digital burnout, remote working impacts, mental health in gig economy, accidents from risk-taking behaviour – acquired brain injury, life-changing injuries, inactivity/sedentary lifestyle.
- Late adulthood: dementia, heart disease, oral health, injury from falls, weakened immune system, complications from influenza.
- Obesity to be covered across the life stages.

C2 Health promotion and prevention strategies

Students will explore the purpose of health and social care promotion and prevention.

- Vaccinations: purpose and role; herd immunity.
- Age-related health checks and screening: newborn hearing screening; growth (height and weight) and developmental milestones (infants); hearing and eyesight checks (across all life stages); health checks for people aged 40-74 (diabetes, hypertension, height/weight, blood pressure, blood test for cholesterol); early cancer screening (cervical, bowel, breast); dementia screening.
- Mental health education: online mental health resources, AI-based support tools and mental health apps – benefits and limitations.
- Dental checks.
- Health education for smoking, alcohol and drugs, sexual health.
- Accident prevention.

C3 Roles of health and social care professionals

For conditions covered in C1, students should be able to identify and outline the roles of the professionals involved in the care and treatment of an individual.

- Nurses: mental health, adult, learning disability, children and young people (CYP) specialist community public health nurse – health visitor, children's practice nurse, school nurse (SN) and occupational health nursing (OHN), digital health nurse, telehealth roles and AI-assisted diagnostics.
- Midwives.
- Doctors: general practitioner, surgeon, psychiatrist.
- Allied professions: physiotherapy, occupational therapy, speech therapy, radiography, podiatry.

- Dentist, dental hygienist.
- Social worker.
- Dietician.
- Care and support workers: domiciliary/residential.
- Psychologist, counsellor.
- Youth worker.
- Social prescriber.

C4 Multidisciplinary and person-centred care

For professionals covered in C3, students should be able to identify and outline the multidisciplinary teams required to meet individual needs.

- Integrated care systems (ICSs): multidisciplinary/multi-agency approach, a range of services working together with the individual to ensure a seamless approach to care, digital integration of care records, telemedicine and remote monitoring technologies.
- Person-centred approach to care, the need to give holistic care: assessment of needs, assessment of the whole person, Roper and Tierney – activities of daily living; WHO Primary Health Care (2018) Strategy.
- Features of multidisciplinary team working:
  - shared decision making – individual using health and social care services at the heart of the process
  - different professionals working across a service – ways of working/ open communication/understanding each other's roles
  - working with families and significant others.

Assessment criteria

Learning aim A: Understand human growth and development across life stages

Learning aim B: Examine factors affecting human growth and development

Pass	Merit	Distinction
A.P1 Describe physical, intellectual, emotional and social development at each life stage. **A.P2** Explain how different aspects of development interrelate and influence holistic growth.	**A.M1** Analyse the application of theories used in human growth and development across three life stages. **A.M2** Analyse how development varies across individuals and life stages.	**AB.D1** Evaluate the impact of factors, health inequities, discrimination and different influences on an individual's development and wellbeing across three life stages.
B.P3 Explain genetic, lifestyle, environmental and socio-economic factors affecting development. **B.P4** Describe health inequities and their impact on individuals across life stages.	**B.M3** Analyse factors that impact on three given individuals at different life stages. **B.M4** Analyse how multiple factors interact to influence development and wellbeing.	

Learning aim C: Explore health promotion and care across life stages

Pass	Merit	Distinction
C.P5 Identify prevalent health conditions across life stages and explain their impact. **C.P6** Describe different health promotion and prevention strategies. **C.P7** Outline the roles and responsibilities of health and social care professionals. [MY – COP]	**C.M5** Analyse roles and responsibilities of different professionals to given health conditions.	**C.D2** Evaluate the effectiveness of multidisciplinary and person-centred approaches to care of an individual at a specific life stage with a given health condition.

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Transferable skills

Managing Yourself	Effective Learning	Interpersonal Skills	Solving Problems
MY – TPR	EL – MOL	IS – WC	SP – CT
MY – PS&R	EL – CL	IS – V&NC	SP – PS
MY – COP √	EL – SRS	IS – T	SP – C&I
MY – PGS	EL – PRS	IS – C&SI	

Table key

*	Signposted to indicate opportunities for development as a part of wider teaching and learning
√	Embedded in teaching, learning and assessment
blank	Not embedded or signposted in unit

Essential information for Pearson Set Assignment (PSA)

Pearson sets the assignment for the assessment of this unit.

The PSA will take 12 hours to complete.

The PSA will be marked by centres and verified by Pearson.

Assessing the PSA

You will make assessment decisions for the PSA using the assessment criteria provided.

Section 1 gives information on PSAs and there is further information on our website.

Further information for teachers and assessors

Resource requirements

There are no special resources needed for this unit.

Essential information for assessment decisions

Learning aims A and B

For distinction standard, students must articulate arguments and views concisely and professionally to analyse the extent to which theories can be used to explain human development. They will draw on and synthesise knowledge and understanding of the different domains of human growth and development across the life course to evaluate the impact of a life event on an individual's health and psychological wellbeing. They will evaluate the significance of events on individuals, reaching reasoned and valid judgements, supported by evidence.

For merit standard, students must provide a balanced discussion of how human growth and development change over time and of the ways that individuals experience life events. They will select relevant information to support their discussion and apply their knowledge appropriately to given situations and scenarios. They will draw on and apply knowledge and understanding of the different domains of human growth and development across the life course.

For pass standard, students must recall knowledge and show understanding of human growth and development across the life course, and of the factors and life events affecting human growth and development across the life course. They will select and organise information appropriately to explain the impact on physical, intellectual, emotional and social growth and development across the life course.

Learning aim C

For distinction standard, students will articulate arguments and views concisely and professionally to analyse the extent to which multidisciplinary and person-centred approaches to care of given health conditions are effective. Students will show a depth of understanding through the application of knowledge to given situations and scenarios. They will evaluate concepts to reach reasoned and valid judgements, supported by evidence. They will draw on and synthesise knowledge and understanding of prevalent health conditions, health promotion and prevention strategies, and roles and responsibilities of health and social care professionals across life stages.

For merit standard, students will present a careful consideration of varied factors related to the impact of health conditions on individuals. They will apply their knowledge appropriately to given situations and scenarios. Students will identify the most important or relevant factors in each situation and arrive at a conclusion supported by evidence. They will draw on and apply knowledge and understanding of prevalent health conditions, health promotion and prevention strategies, and roles and responsibilities of health and social care professionals across life stages.

For pass standard, students will recall knowledge and show understanding of the prevalent health conditions across life stages and explain their impact. They will select and organise information appropriately to describe different health promotion and prevention strategies and outline the roles and responsibilities of health and social care professionals.

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Links to other units

This unit links to:

- Unit 3: Promoting Public Health
- Unit 4: Principles of Safe Practice in Health and Social Care
- Unit 5: Enquiries into Current Research in Health and Social Care
- Unit 9: Principles of Effective Care.

It may be advisable to teach this unit before:

- Unit 2: Anatomy and Physiology for Health and Social Care
- Unit 10: Physiological Disorders and their Care
- Unit 11: Supporting Individuals with Additional Needs
- Unit 12: Microbiology for Health Science
- Unit 14: Caring for Individuals with Dementia
- Unit 15: Assessing Children's Development Support Needs
- Unit 16: Nutritional Health
- Unit 17: Understanding Mental Wellbeing
- Unit 20: Biochemistry for Health.

Unit 2: Anatomy and Physiology for Health and Social Care

Level: 3

Unit type: Pearson Set Assignment

Guided learning hours: 60

Unit in brief

Students will explore the organisation, structure and normal physiological functioning of the human body and examine how common disorders affect health and body systems.

Unit introduction

Understanding the human body is essential for anyone pursuing a career in health and social care. This unit introduces the organisation and structure of the body, from cells and tissues to organs and systems, and explores how these components work together to maintain normal physiological functioning.

In this unit, you will investigate the impact of common disorders on health and body systems. By examining causes, primary and secondary effects and the interrelationships between body systems, you will gain insight into how health conditions influence overall wellbeing and care needs of individuals.

Successful completion of this unit provides a strong foundation for progression to higher-level study in health and social care, nursing and allied health professions. It also supports career development by equipping you with essential biological knowledge needed for roles in healthcare and related sectors.

Learning aims

In this unit you will:

A Understand the organisation and structure of the human body

B Explore the normal physiological functioning of key body systems

C Examine the causes and effects of common disorders on body systems and the implications for care needs.

Summary of unit

Learning aim	Key content areas	Assessment approach
A Understand the organisation and structure of the human body	**A1** Levels of organisation of cells, tissues, organs, systems **A2** Structure and function of animal cell organelles **A3** Main tissue types **A4** Homeostasis and negative feedback	This unit is assessed through a Pearson Set Assignment.
B Explore the normal physiological functioning of key body systems	**B1** Cardiovascular system **B2** Respiratory system **B3** Nervous system **B4** Digestive system	
C Examine the causes and effects of common disorders on body systems and the implications for care needs	**C1** Common disorders, their causes, primary and secondary effects **C2** Impact of disorders on health needs of the individual	

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Content

The essential content is set out under content areas. Students must cover all specified content before the assessment.

Learning aim A: Understand the organisation and structure of the human body

A1 Levels of organisation of cells, tissues, organs, systems

- Levels of organisation: cells, tissues, organs, organ systems, organism.

A2 Structure and function of animal cell organelles

- Cell structure and organelles:
  - plasma membrane (selective barrier), cytoplasm (gel-like substance that supports the organelles), nucleus (genetic material), ribosomes (protein synthesis), mitochondria (ATP production), endoplasmic reticulum (protein synthesis and transport), Golgi apparatus (protein modification).

A3 Main tissue types

- Epithelial: simple and compound; lining and protection.
- Connective: blood, cartilage, bone, areolar, adipose; support and transport.
- Muscle: striated (skeletal), non-striated (smooth), cardiac; movement and contraction.
- Nervous: sensory and motor neurons, neuroglia; transmission of impulses.

A4 Homeostasis and negative feedback

- Homeostasis: definition and importance.
- Negative feedback mechanisms: thermoregulation, blood glucose regulation, osmoregulation.

Learning aim B: Explore the normal physiological functioning of key body systems

B1 Cardiovascular system

- Heart structure and cardiac cycle.
- Blood vessels: arteries, veins, capillaries.
- Blood composition: plasma, RBCs, WBCs, platelets.

B2 Respiratory system

- Trachea, bronchi, bronchioles, alveoli.
- Mechanism of ventilation and gaseous exchange.
- Role of diaphragm and intercostal muscles.

B3 Nervous system

- CNS (brain and spinal cord), PNS (nerves and ganglia).
- Autonomic nervous system: sympathetic and parasympathetic roles.

B4 Digestive system

- Role of the alimentary canal – oesophagus, stomach, small bowel, large bowel and accessory organs – liver, gallbladder, pancreas, salivary glands in the breakdown and absorption of food.

Learning aim C: Examine the causes and effects of common disorders on body systems and the implications for care needs

C1 Common disorders, their causes, primary and secondary effects

- Disorders and their impact:
  - coronary heart disease: causes (atherosclerosis, hypertension), primary effects (heart attack, angina), secondary effects (shortness of breath)
  - stroke: causes (blocked artery or burst vessel), primary effects (brain damage), secondary effects (muscle weakness, dysphasia)
  - COPD and asthma: causes (smoking, genetic factors), primary effects (breathlessness, wheezing), secondary effects (weight loss, anxiety)
  - diabetes: type 1 and 2 causes, primary effects (uncontrolled blood sugar), secondary effects (nerve damage, kidney problems)
  - dementia and brain injury: cognitive disruption, secondary effects (memory loss, personality changes)
  - cancer (breast, bowel, lung): causes (genetic, lifestyle), primary effects (organ-specific symptoms), secondary effects (metastasis).

C2 Impact of disorders on health needs of the individual

- Links between disorders and holistic health needs.
- Implications for care planning and support:
  - holistic needs (physical, emotional, social)
  - adjustments for mobility, nutrition, medication, monitoring.
- Linking disorder effects to care strategies.
- Importance of multidisciplinary teams in managing complex conditions.

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Assessment criteria

Learning aim A: Understand the organisation and structure of the human body

Learning aim B: Explore the normal physiological functioning of key body systems

Pass	Merit	Distinction
A.P1 Describe levels of organisation of the human body. **A.P2** Describe the structure and function of animal cell organelles. **A.P3** Explain the role of different tissue types in the body.	**A.M1** Analyse how tissue structure supports its function. **A.M2** Assess the importance of homeostasis and negative feedback mechanisms.	**AB.D1** Evaluate how structural organisation and homeostatic processes interact to maintain effective body functioning.
B.P4 Describe the structure and function of the cardiovascular and respiratory systems. **B.P5** Outline the role of the nervous and digestive systems in communication and maintenance of a consistent internal environment in the body.	**B.M3** Analyse how body systems work together to maintain homeostasis.	

Learning aim C: Examine the causes and effects of common disorders on body systems and the implications for care needs

Pass	Merit	Distinction
C.P6 Describe the causes and primary effects of three common disorders. **C.P7** Outline the secondary effects of three selected disorders on health. **C.P8** Identify care considerations for individuals with specific disorders.	**C.M4** Analyse how disorders disrupt normal physiological functioning. **C.M5** Assess the interrelationships between body systems affected by disorders.	**C.D2** Evaluate the impact of disorders on holistic health and care needs, making justified recommendations. [SP – CT]

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Transferable skills

Managing Yourself	Effective Learning	Interpersonal Skills	Solving Problems
MY – TPR	EL – MOL	IS – WC	SP – CT √
MY – PS&R	EL – CL	IS – V&NC	SP – PS
MY – COP	EL – SRS	IS – T	SP – C&I
MY – PGS	EL – PRS	IS – C&SI	

Table key

*	Signposted to indicate opportunities for development as a part of wider teaching and learning
√	Embedded in teaching, learning and assessment
blank	Not embedded or signposted in unit

Essential information for Pearson Set Assignment (PSA)

Pearson sets the assignment for the assessment of this unit.

The PSA will take 12 hours to complete.

The PSA will be marked by centres and verified by Pearson.

Assessing the PSA

You will make assessment decisions for the PSA using the assessment criteria provided.

Section 1 gives information on PSAs and there is further information on our website.

Further information for teachers and assessors

Resource requirements

There are no special resources needed for this unit.

Essential information for assessment decisions

Learning aims A and B

For distinction standard, students critically evaluate how structural organisation enables effective activities of body systems, including reference to tissue structures and functions at cell and tissue type levels. They should show how these concepts apply to multiple body systems, and contribute to homeostasis, with reasoned conclusions.

For merit standard, students analyse how tissue structure supports its function and assess homeostasis with examples of negative feedback (for example thermoregulation, blood glucose). Evidence should show reasoning and use of examples. Students analyse how body systems are interlinked to homeostatic processes and interact to maintain health. Evidence should demonstrate links between systems and processes.

For pass standard, students provide clear descriptions of levels of organisation (cells, tissues, organs, systems), identify cell organelles and their functions, and explain the role of different tissue types. They describe the structure and function of cardiovascular, respiratory, nervous and digestive systems. Students are able to show how at least two of these systems work together to provide a stable internal environment to facilitate effective body functioning. Evidence may include labelled diagrams, written explanations or presentations.

Learning aim C

For distinction standard, students evaluate the impact of disorders on holistic health and care needs, making justified recommendations. They identify care considerations and outline how biological knowledge informs care planning. Evidence should show synthesis of biological and care knowledge and include care plan templates or written explanations.

For merit standard, students analyse how disorders disrupt normal functioning and analyse interrelationships between affected systems. They apply understanding to suggest interventions and analyse how strategies address primary and secondary effects. Evidence should include diagrams or comparative tables and detailed care plans or reports.

For pass standard, students describe causes and primary effects of at least three disorders and outline secondary effects. They identify care considerations and outline how biological knowledge informs care planning. Evidence may include case studies, care plan templates or written summaries and explanations.

Links to other units

This unit links to:

- Unit 3: Promoting Public Health
- Unit 4: Principles of Safe Practice in Health and Social Care
- Unit 5: Enquiries into Current Research in Health and Social Care.

It may be advisable to teach this unit before:

- Unit 10: Physiological Disorders and their Care
- Unit 11: Supporting Individuals with Additional Needs
- Unit 12: Microbiology for Health Science
- Unit 14: Caring for Individuals with Dementia
- Unit 15: Assessing Children's Development Support Needs
- Unit 16: Nutritional Health
- Unit 17: Understanding Mental Wellbeing
- Unit 20: Biochemistry for Health.

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Unit 3: Promoting Public Health

Level: 3

Unit type: Pearson Set Assignment

Guided learning hours: 60

Unit in brief

Students explore the purpose of health education, key health issues and factors affecting wellbeing, and how health education campaigns influence behaviour change. They will also develop skills to plan a small-scale health education activity to promote positive health outcomes.

Unit introduction

Health education plays a vital role in improving the wellbeing of individuals and communities. It focuses on raising awareness of health risks, promoting healthy behaviours, and reducing the incidence of illness through education and prevention strategies. By understanding the purpose of health education, you can appreciate its role in shaping healthier societies and reducing health inequities.

In this unit, you will explore key health issues and priorities at both local and national levels, as well as the factors that influence health and wellbeing. You will examine how health education campaigns use models and approaches to encourage positive behaviour change and assess their impact on individuals and communities. Also, you will develop skills to plan a small-scale health education activity that addresses a specific health need.

Studying this unit will support progression into higher education or employment in health and social care roles. It develops transferable skills such as research, planning and communication, which are essential for careers in public health, health promotion and community work. It also provides a strong foundation for further study in health sciences and related fields.

Learning aims

In this unit you will:

A Understand the purpose of health education

B Explore key health issues and factors affecting health and wellbeing

C Examine health education campaigns and their impact on health and wellbeing

D Plan a small-scale health education activity.

Summary of unit

Learning aim	Key content areas	Assessment approach
A Understand the purpose of health education	**A1** Reasons for health education **A2** Role in addressing health challenges and influencing behaviour change **A3** Organisations influencing health education **A4** Guidance impacting on health education	This unit is assessed through a Pearson Set Assignment.
B Explore key health issues and factors affecting health and wellbeing	**B1** Health issues **B2** Factors affecting health and wellbeing	
C Examine health education campaigns and their impact on health and wellbeing	**C1** Examples of international, national and local campaigns **C2** Models of behaviour change **C3** Impact of campaigns on individuals and communities	
D Plan a small-scale health education activity	**D1** Setting aims and objectives (SMART) **D2** Resources and delivery **D3** Ethical considerations and use of resources **D4** Methods for evaluating success	

Content

The essential content is set out under content areas. Students must cover all specified content before the assessment.

Learning aim A: Understand the purpose of health education

A1 Reasons for health education

- Purpose of health education.
- Reduce incidence of ill health and prevent disease.
- Promote healthy lifestyles and positive behaviour change.
- Empower individuals and communities to make informed choices.
- Address health inequities and promote equity.

A2 Role in addressing health challenges and influencing behaviour change

- Role of health education.
- Identify health priorities at local and national levels.
- Respond to demographic data and health trends.
- Support integrated care and public health strategies.

A3 Organisations influencing health education

- Organisations influencing health education:
  - World Health Organization (WHO), local authorities.

A4 Guidance impacting on health education

- Guidance and regulations:
  - WHO Sustainable Development Goals.
- Monitoring health:
  - epidemiological data, government reports, local health profiles.

Learning aim B: Explore key health issues and factors affecting health and wellbeing

B1 Health issues

- Health issues: smoking, diet, mental health, substance misuse, sexual health.

B2 Factors affecting health and wellbeing

- Health issues and priorities:
  - smoking, diet and nutrition, mental health, substance misuse, sexual health.

- Factors affecting health and wellbeing:
  - social: family, peer influence, social networks
  - economic: income, employment, affordability of healthy options
  - environmental: housing, access to services, pollution
  - behavioural: stereotypes, compliance, empowerment
  - education: access to learning, health literacy
  - media: influence of social media, misinformation
  - health inequities: age, gender, ethnicity, disability, location.

Learning aim C: Examine health education campaigns and their impact on health and wellbeing

C1 Examples of international, national and local campaigns

- Current and ongoing campaigns:
  - international: WHO initiatives
  - national: health campaigns
  - local: health promotion projects.

C2 Models of behaviour change

- Models and approaches:
  - Health Belief Model, Transtheoretical Model (stages of change), Social Cognitive Theory, Theory of Reasoned Action.

C3 Impact of campaigns on individuals and communities

- Impact of campaigns:
  - behaviour change outcomes
  - reduction in health risks and improved wellbeing
  - addressing health inequities.
- Measuring effectiveness:
  - data analysis, surveys, feedback, long-term health outcomes.

Learning aim D: Plan a small-scale health education activity

D1 Setting aims and objectives (SMART)

- Planning process:
  - define aims and objectives (SMART)
  - identify target audience and needs
  - select appropriate models and approaches.

D2 Resources and delivery

- Printed materials, digital resources, interactive sessions.

D3 Ethical considerations and use of resources

- Ethical considerations:
  - confidentiality, informed consent, cultural sensitivity.

D4 Methods for evaluating success

- Evaluation:
  - questionnaires, feedback, focus groups, observation, data analysis.

Assessment criteria

Learning aim A: Understand the purpose of health education

Learning aim B: Explore key health issues and factors affecting health and wellbeing

Pass	Merit	Distinction
A.P1 Explain the purpose and role of health education in promoting wellbeing. **A.P2** Identify organisations involved in health education and their functions. **A.P3** Outline guidance and regulations that influence health education.	**A.M1** Analyse how guidance and organisations work together to support health education. **A.M2** Discuss how monitoring systems inform health education priorities.	**AB.D1** Justify the need for health education and monitoring in response to health issues and local and national circumstances. [SP – CT]
B.P4 Explain one key health issue and its impact on individuals and communities. **B.P5** Describe factors that affect health and wellbeing in relation to a chosen issue.	**B.M3** Analyse the factors that affect health and wellbeing in relation to a chosen issue.	

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Learning aim C: Examine health education campaigns and their impact on health and wellbeing

Learning aim D: Plan a small-scale health education activity

Pass	Merit	Distinction
C.P6 Describe models and approaches used in health education campaigns.	**C.M4** Assess the effectiveness of health education campaigns.	**CD.D2** Justify the proposed health education plan with reference to models, approaches and expected outcomes.
D.P7 Produce a plan for a small-scale health education activity, identifying resources and ethical considerations, aims, objectives and target audience. [MY – PGS]	**D.M5** Assess the strengths and limitations of the proposed health education plan, suggesting potential improvements.	

Transferable skills

Managing Yourself	Effective Learning	Interpersonal Skills	Solving Problems
MY – TPR	EL – MOL	IS – WC	SP – CT √
MY – PS&R	EL – CL	IS – V&NC	SP – PS
MY – COP	EL – SRS	IS – T	SP – C&I
MY – PGS √	EL – PRS	IS – C&SI	

Table key

*	Signposted to indicate opportunities for development as a part of wider teaching and learning
√	Embedded in teaching, learning and assessment
blank	Not embedded or signposted in unit

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Essential information for Pearson Set Assignment (PSA)

Pearson sets the assignment for the assessment of this unit.

The PSA will take 15 hours to complete.

The PSA will be marked by centres and verified by Pearson.

Assessing the PSA

You will make assessment decisions for the PSA using the assessment criteria provided.

Section 1 gives information on PSAs and there is further information on our website.

Further information for teachers and assessors

Resource requirements

For this unit, students must have access to:

- library resources with key texts and other reference material
- local and national media reports.

Essential information for assessment decisions

Learning aims A and B

For distinction standard, students will articulate arguments and views concisely and professionally to prove the need for health education and monitoring in response to health issues and local and national circumstances. They will use data and evidence to support arguments. Evidence could be an extended report or evaluative essay.

For merit standard, students will present a careful consideration of how guidance and organisations work together to support health education. They will take into account different ideas of how monitoring systems (for example epidemiological data) inform health priorities. Students will examine, methodically and in detail, the combined impact of multiple factors on health outcomes. Evidence should show depth, using examples and links to real-life data.

For pass standard, students must recall knowledge and show understanding of the purpose and role of health education with examples. They will select and organise information appropriately to identify organisations involved in health education and their functions. Students will give a general description of relevant guidance and regulations that influence health education. They will provide relevant facts about one key health issue and its impact on individuals and communities. Students will give a detailed account of factors affecting health and wellbeing in relation to the chosen issue. Evidence can include written reports, fact sheets or presentations.

Learning aims C and D

For distinction standard, students will articulate arguments and views concisely and professionally to prove the need for health education in relation to a specific health issue, considering influencing factors and the effectiveness of campaigns. They will use evidence from health data and behaviour change models. Students will critically evaluate the proposed activity in terms of its relevance, feasibility and potential impact on the target audience. Students should use evidence from health data and behaviour change models and approaches.

For merit standard, students will critically appraise the effectiveness of campaigns using data and examples. They will make judgements based on the information they have learned and their own insights of the strengths and limitations of the proposed plan and suggest areas for improvement.

For pass standard, students will select and organise information appropriately to describe different health education campaigns (local, national, international). They will recall knowledge and show understanding of models and approaches used in these campaigns. Students will produce a plan that includes aims, objectives, target audience, resources and ethical considerations.

Links to other units

This unit links to:

- Unit 1: Human Lifespan Development
- Unit 2: Anatomy and Physiology for Health and Social Care
- Unit 4: Principles of Safe Practice in Health and Social Care
- Unit 5: Enquiries into Current Research in Health and Social Care
- Unit 9: Principles of Effective Care.

It may be advisable to teach this unit before:

- Unit 6: Psychological Perspectives
- Unit 7: Infection Prevention and Control
- Unit 8: Sociological Perspectives
- Unit 10: Physiological Disorders and their Care
- Unit 12: Microbiology for Health Science
- Unit 13: Policy in Health and Social Care
- Unit 16: Nutritional Health.

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Unit 4: Principles of Safe Practice in Health and Social Care

Level: 3

Unit type: Pearson Set Assignment

Guided learning hours: 60

Unit in brief

Students will explore how safe, inclusive and sustainable environments are maintained in health and social care through guidance, policies, professional responsibilities and digital safety practices. They will develop knowledge and skills to monitor, improve and future-proof care settings using person-centred approaches and emerging technologies.

Unit introduction

Safe environments are the foundation of quality health and social care. This unit explores how physical spaces, digital systems and professional practices work together to protect individuals and promote wellbeing.

In this unit, you will examine the principles of person-centred care and the importance of inclusive, sustainable environments that respect diversity and dignity. Modern care settings face new challenges, including the integration of technology, cybersecurity, and the need for resilience in the face of global health risks. You will investigate guidance, policies and ethical responsibilities that underpin safe practice, alongside emerging themes such as telehealth, electronic records and green design principles.

By completing this unit, you will develop essential knowledge and transferable skills for progression into higher education and careers in health and social care. The unit also prepares you for roles that demand digital literacy, regulatory awareness and leadership in creating safe, future-ready care environments.

Learning aims

In this unit you will:

A Explore appropriate care environments to meet individuals' needs at different life stages

B Explore aspects of guidance, regulations and policies that support safe environments in health and social care settings

C Examine aspects of monitoring and maintaining safe practice in health and social care environments.

Summary of unit

Learning aim	Key content areas	Assessment approach
A Explore appropriate care environments to meet individuals' needs at different life stages	**A1** Care environments **A2** Person-centred and inclusive design **A3** Environmental factors and the care experience **A4** Challenges to providing appropriate care environments	This unit is assessed through a Pearson Set Assignment.
B Explore aspects of guidance, regulations and policies that support safe environments in health and social care settings	**B1** Core guidance and policies on safe practice **B2** Duty of care contribution to safe practice **B3** Working with vulnerable individuals **B4** Emerging themes in health and social care settings	
C Examine aspects of monitoring and maintaining safe practice in health and social care environments	**C1** Standards and regulation **C2** Responsibilities for maintaining safe environments **C3** Record keeping in health and social care environments **C4** Poor practice and impact in health and social care	

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Content

The essential content is set out under content areas. Students must cover all specified content before the assessment.

Learning aim A: Explore appropriate care environments to meet individuals' needs at different life stages

A1 Care environments

Students need to understand the different environments that provide care for individuals and the factors that must be considered to meet the unique needs of each individual in health and social care settings. Students should consider the range of services across physical health, mental health, learning disabilities and rehabilitation provision.

- Acute, community, residential, hospice, virtual wards, telehealth platforms.
- Integration of digital health tools (apps, wearables, remote monitoring technologies, telemedicine, virtual consultations), AI-assisted diagnostics.

A2 Person-centred and inclusive design

- Holistic approach (physical, emotional, social).
- Co-production with individuals and trauma-informed care, health literacy and cultural safety.
- Accessibility: ramps, lifts, signage, digital wayfinding, neurodiversity-friendly spaces.

A3 Environmental factors and the care experience

- Smart environments (wayfinding with digital signage, sensor-based monitoring, smart/Internet of Things (IoT) safety features (fall detection, real time location systems (RTLS)), temperature control, quiet/low-stimulus spaces).
- Sustainability and green design principles (energy-efficient buildings, eco-friendly materials, light, air quality, biophilic design).
- Noise reduction, private spaces, outdoor access.
- Environmental risks and resilience (overheating, poor air quality) and digital wayfinding for neurodiversity-friendly design.

A4 Challenges to providing appropriate care environments

- Digital inclusion challenges (access to devices, skills, internet connectivity, connectivity for remote care), cybersecurity risks, AI ethics in decision making for integrated care systems.
- Cybersecurity risks in remote care.
- Workforce skill gaps in tech-enabled care.
- Complexity of integrated care systems and data sharing.

Learning aim B: Explore aspects of guidance, regulations and policies that support safe environments in health and social care settings

B1 Core guidance and policies on safe practice

- World Health Organization's (WHO) Global Patient Safety Plan, ISO 45001 (international standard for health and safety at work), ISO 14001 (environmental management systems, national and regional policies and regulations), local health settings such as hospitals and medical centres (policies and procedures), AI governance frameworks, emerging health tech compliance standards.
- IMDRF Medical Device Cybersecurity Guide, national and regional policies on data protection and cybersecurity, regional and national cybersecurity strategies, hospital and care settings policies and procedures for data protection and cybersecurity.
- Online communication and telehealth governance (consent, identity verification, remote examination limits).

B2 Duty of care contribution to safe practice

- Physical safety and digital duty of care (ensuring safe selection/use of health apps, wearables, telehealth platforms, AI tools, transparent algorithm oversight, handling automated alerts/false positives, data minimisation), responsibility for safeguarding data privacy alongside physical safety.
- Duty of candour and transparency in tech-enabled care.

B3 Working with vulnerable individuals

- Inclusive recruitment (skills in digital literacy, cultural competence and intersectionality), speaking up/just culture.
- Digital safeguarding (online abuse, scams, deepfakes), violence and aggression management, trauma-informed approaches, intersectionality and health inequities, accessible communication (Easy Read, interpreters, AAC, translation).
- Responding to concerns via whistleblowing and safeguarding policies.

B4 Emerging themes in health and social care settings

- AI ethics and bias.
- Cybersecurity compliance.

Learning aim C: Examine aspects of monitoring and maintaining safe practice in health and social care environments [IS – WC]

C1 Standards and regulation

- International Patient Safety Goals (IPSG) from Joint Commission International (JCI), WHO Global Patient Safety Action Plan.

- Professional codes (International Council of Nurses (ICN), WHO Code of Ethics and Professional Conduct), regional and national professional codes, IPCHS Framework, regional and national policies, AI and digital device regulation (Software as a Medical Device concepts), vendor assurance (interoperability, security testing).
- Digital clinical safety standards, cyber incident response, data quality (completeness, timeliness, accuracy).
- Digital health accreditation standards (ISO 27001 for data security, Global Health Certification Network (WHO) regional and local digital safety standards), AI-driven care quality monitoring.

C2 Responsibilities for maintaining safe environments

- Employers: risk assessment, training, cybersecurity protocols, business continuity.
- Employees: compliance with digital safety, correct use of electronic patient records (EPR), reporting incidents.
- Cyber and data responsibilities (access controls, multi-factor authentication (MFA), phishing awareness), digital clinical safety roles (safety officers), business continuity and incident response (including ransomware), fit-for-purpose staffing and rest facilities, psychological safety.

C3 Record keeping in health and social care environments

- Local and centre policies on compliance with data protection requirements, secure storage, blockchain for secure health records, AI-powered predictive analytics for care planning, training on digital literacy for staff and individuals receiving care.
- Digital records: EPR, telehealth, wearables, AI-assisted documentation.
- Cyber hygiene: strong passwords, MFA, logout protocols.
- Structured records (SNOMED CT concepts awareness), interoperability, patient-held records, audit trails, AI-assisted documentation (benefits/risks, hallucinations, prompt hygiene).

C4 Poor practice and impact in health and social care

- Non-person-centred care.
- Tech misuse (alert fatigue, automation complacency, copy-paste errors, incorrect AI recommendations, data breaches, digital fatigue among staff, ethical concerns with algorithmic bias in care delivery, environmental non-compliance (overheating/IPC air changes), misinformation management).
- Data breaches and algorithmic bias.
- Impact on staff wellbeing and organisational reputation.

Assessment criteria

Learning aim A: Explore appropriate care environments to meet individuals' needs at different life stages

Pass	Merit	Distinction
A.P1 Explain the purpose of health and social care services and how they meet the needs of two individuals. **A.P2** Describe the factors that may contribute to service provision and influence the care received by two individuals.	**A.M1** Assess the impact of factors on service provision and the potential challenges to providing appropriate care to meet the needs of two individuals.	**A.D1** Evaluate the challenges of providing an appropriate care environment for two individuals.

Learning aim B: Explore aspects of guidance, regulations and policies that support safe environments in health and social care settings

Pass	Merit	Distinction
B.P3 Describe how health and safety guidance supports safe practice in a selected health and social care setting. **B.P4** Describe how duty of care supports safe practice and protects vulnerable individuals in a selected health and social care setting.	**B.M2** Analyse how health and safety guidance and duty of care influence safe practice in a selected health and social care setting.	**B.D2** Evaluate the effectiveness of health and safety guidance and duty of care to ensure safe practice in a selected health and social care setting.

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Learning aim C: Examine aspects of monitoring and maintaining safe practice in health and social care environments

Pass	Merit	Distinction
C.P5 Describe the roles and responsibilities of employers and employees to meet regulatory and legal requirements and ethical obligations to maintain safe practice in a selected health and social care setting. **C.P6** Describe the potential impact of poor practice in maintaining safe environments on employers, employees and individuals in a selected health and social care setting.	**C.M3** Discuss the role of key stakeholders in maintaining safe practice and make recommendations to improve the effectiveness of safe practice in a selected care setting.	**C.D3** Justify recommendations for effective safe practice in a selected health and social care setting.

Transferable skills

Managing Yourself	Effective Learning	Interpersonal Skills	Solving Problems
MY – TPR	EL – MOL	IS – WC *	SP – CT
MY – PS&R	EL – CL	IS – V&NC	SP – PS
MY – COP	EL – SRS	IS – T	SP – C&I
MY – PGS	EL – PRS	IS – C&SI	

Table key

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√	Embedded in teaching, learning and assessment
blank	Not embedded or signposted in unit

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Essential information for Pearson Set Assignment (PSA)

Pearson sets the assignment for the assessment of this unit.

The PSA will take 12 hours to complete.

The PSA will be marked by centres and verified by Pearson.

Assessing the PSA

You will make assessment decisions for the PSA using the assessment criteria provided.

Section 1 gives information on PSAs and there is further information on our website.

Further information for teachers and assessors

Resource requirements

For this unit, students must have access to current regulations, policies and codes of practice relating to safe practice in the health and social care setting.

Essential information for assessment decisions

Learning aim A

For distinction standard, students will evaluate complex challenges (for example integrated care, sustainability, tech adoption). They will propose innovative solutions (digital tools, inclusive design). Evidence may be a strategic improvement plan supported by research and justification.

For merit standard, students will assess the impact of environmental factors on service provision and user experience. They will discuss specific challenges (for example resource limits, digital access). Evidence may be a comparative analysis table or case study with reasoned judgements.

For pass standard, students will provide clear descriptions of at least two local health and social care services. They will explain how these services meet individual needs across life stages. Students will consider basic environmental factors (for example accessibility, layout) and how they influence care. Evidence may be a written report or presentation with examples and diagrams.

Learning aim B

For distinction standard, students will evaluate effectiveness of guidance, policies and procedures and duty of care in ensuring safety. They will consider emerging issues (digital governance, safeguarding online). Evidence may be a critical evaluation with recommendations for improvement.

For merit standard, students will analyse how guidance, policies and procedures, and duty of care influence practice in the setting. They will show links between policy and day-to-day procedures. Evidence may be an analytical report with real or simulated examples.

For pass standard, students will describe two pieces of guidance, policies and procedures and their role in safe practice. They will explain duty of care and how it protects vulnerable individuals. Evidence may be a short written explanation with examples from a chosen setting.

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Learning aim C

For distinction standard, students will justify comprehensive recommendations for safe practice. They will integrate national standards, digital safety and human factors. Evidence may be a detailed improvement proposal with supporting data and references.

For merit standard, students will discuss stakeholder roles and make practical recommendations to improve safety. Evidence may be an action plan with supporting rationale.

For pass standard, students will describe roles and responsibilities of employers and employees. They will explain impact of poor practice on individuals and organisations. Evidence may be a written summary or infographic.

Links to other units

This unit links to:

- Unit 2: Anatomy and Physiology for Health and Social Care
- Unit 9: Principles of Effective Care.

It may be advisable to teach this unit before:

- Unit 7: Infection Prevention and Control
- Unit 10: Physiological Disorders and their Care
- Unit 11: Supporting Individuals with Additional Needs
- Unit 12: Microbiology for Health Science
- Unit 14: Caring for Individuals with Dementia
- Unit 15: Assessing Children's Development Support Needs
- Unit 17: Understanding Mental Wellbeing
- Unit 19: Biomedical Science
- Unit 20: Biochemistry for Health
- Unit 21: Complementary Therapies for Health and Social Care.

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Unit 5: Enquiries into Current Research in Health and Social Care

Level: 3

Unit type: Pearson Set Assignment

Guided learning hours: 60

Unit in brief

Students explore the purpose of research in health and social care, examine research methods and ethical principles, and develop essential research skills. Students will also evaluate the impact of research on individuals, provision and practice in the health and social care sector.

Unit introduction

Research plays a vital role in health and social care by helping professionals understand current issues, improve services and enhance outcomes for individuals. From investigating the effectiveness of treatments to exploring lifestyle factors that influence wellbeing, research provides evidence that informs decisions and shapes policy.

In this unit, you will learn about the purpose of research, the methods used to collect and analyse data, and the ethical principles that guide research in health and social care. You will also develop practical research skills, including planning, sourcing information and interpreting findings, while considering the impact of research on individuals and service provision.

Completing this unit will prepare you for progression to higher education courses where research is a key component, such as health sciences, nursing or social care degrees. It will also support your development for employment in the health and social care sector by strengthening your analytical, organisational and problem-solving skills.

Learning aims

In this unit you will:

A Understand the purpose of research in health and social care

B Explore research methods used in health and social care

C Develop research skills for health and social care investigations

D Examine the impact of research on health and social care practice.

Summary of unit

Learning aim	Key content areas	Assessment approach
A Understand the purpose of research in health and social care	**A1** Reasons for research **A2** Issues in health and social care **A3** Research organisations	This unit is assessed through a Pearson Set Assignment.
B Explore research methods used in health and social care	**B1** Research methodologies **B2** Ethical principles	
C Develop research skills for health and social care investigations	**C1** Selecting secondary sources **C2** Planning research **C3** Managing research	
D Examine the impact of research on health and social care practice	**D1** Effects of research on individuals **D2** Effects of research on provision and practice **D3** Further research	

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Content

The essential content is set out under content areas. Students must cover all specified content before the assessment.

Learning aim A: Understand the purpose of research in health and social care

A1 Reasons for research

- Improving outcomes for individuals (more effective treatments, enhanced care).
- Informing policy and practice (guidelines for care delivery).
- Extending knowledge and understanding of health conditions and social care needs.
- Identifying gaps in provision and service delivery.

A2 Issues in health and social care

- Health conditions: cardiovascular, respiratory, skeletal, muscular, digestive, nervous, endocrine, immune systems.
- Lifestyle factors: diet, exercise, smoking, substance misuse, socio-economic influences.
- Social care needs: ageing population, disability, mental health, major life events.
- Global issues: poverty, inequity, access to clean water, climate change, food insecurity, pandemic illness.

A3 Research organisations

- Health authorities, local authorities, charities, social service departments, community organisations.
- Data for health:
  - Use of data from World Health Organization (WHO), local authorities, healthcare providers and national health databases.

Learning aim B: Explore research methods used in health and social care

B1 Research methodologies

- Primary and secondary sources of knowledge.
- Questionnaires, interviews, case studies, scientific experiments, observations.
- Advantages and disadvantages of each method.
- Reliability and validity:
  - how to ensure accuracy and consistency in research findings.
- Sampling methods:
  - random, systematic, stratified, purposive, quota, convenience.
- Qualitative versus quantitative data:
  - characteristics, uses, examples.

B2 Ethical principles

- Confidentiality, informed consent, safeguarding vulnerable participants.
- Data protection legislation and professional conduct.
- Accurate representation of results.
- Avoiding conflicts of interest.

Learning aim C: Develop research skills for health and social care investigations

[EL – MOL]

C1 Selecting secondary sources

- Professional journals, textbooks, websites, research organisations, government publications.
- Literature searches using academic databases and keywords.

C2 Planning research

- Setting aims, objectives, research questions.
- Defining rationale, selecting methods and samples.
- Timescales, monitoring progress, success measures.

C3 Managing research

- Time management, organisational skills, non-judgemental practice.
- Data analysis:
  - using graphs, tables, statistics
  - triangulation of data, recognising bias, ensuring validity and reliability.
- Referencing:
  - creating bibliographies and reference lists using standard formats.

Learning aim D: Examine the impact of research on health and social care practice

D1 Effects of research on individuals

- Improved care, independence, wellbeing.
- Recommendations for specific groups of individuals based on findings.

D2 Effects of research on provision and practice

- Policy changes, new treatments, improved service delivery.
- Development of working practices and professional standards.

D3 Further research

- Identifying gaps and areas for future investigation.
- Considering implications for long-term sector improvements.

Assessment criteria

Learning aim A: Understand the purpose of research in health and social care

Learning aim B: Explore research methods used in health and social care

Pass	Merit	Distinction
A.P1 Describe the purpose of research in health and social care. **A.P2** Identify key issues that research addresses in health and social care.	**A.M1** Discuss the importance of research for improving outcomes and informing practice.	**AB.D1** Evaluate how research purpose influences methods and ethical principles in relation to validity and reliability.
B.P3 Explain different research methods used in health and social care. **B.P4** Describe ethical principles applied in research.	**B.M2** Assess the strengths and limitations of research methods. **B.M3** Analyse how ethical principles affect research design.	

Learning aim C: Develop research skills for health and social care investigations

Learning aim D: Examine the impact of research on health and social care practice

Pass	Merit	Distinction
C.P5 Outline appropriate secondary sources for health and social care research. [EL – SRS] **C.P6** Explain key research skills needed to plan and manage research.	**C.M4** Discuss the importance of research skills for producing valid and reliable findings.	**CD.D2** Evaluate how research skills contribute to the quality of research outcomes and the need for further research to develop practice and provision.
D.P7 Describe the effects of research on individuals and practitioners. **D.P8** Explain the effects of research on provision and practice.	**D.M5** Analyse the implications of research findings for service improvement.	

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Transferable skills

Managing Yourself	Effective Learning	Interpersonal Skills	Solving Problems
MY – TPR	EL – MOL *	IS – WC	SP – CT
MY – PS&R	EL – CL	IS – V&NC	SP – PS
MY – COP	EL – SRS √	IS – T	SP – C&I
MY – PGS	EL – PRS	IS – C&SI	

Table key

*	Signposted to indicate opportunities for development as a part of wider teaching and learning
√	Embedded in teaching, learning and assessment
blank	Not embedded or signposted in unit

Essential information for Pearson Set Assignment (PSA)

Pearson sets the assignment for the assessment of this unit.

The PSA will take 15 hours to complete.

The PSA will be marked by centres and verified by Pearson.

Assessing the PSA

You will make assessment decisions for the PSA using the assessment criteria provided.

Section 1 gives information on PSAs and there is further information on our website.

Further information for teachers and assessors

Resource requirements

There are no special resources needed for this unit.

Essential information for assessment decisions

Learning aims A and B

For distinction standard, students must demonstrate the results of careful consideration of research methods and ethical principles in relation to validity and reliability. Students will include a justification of why certain methods are more suitable for specific research aims.

For merit standard, students must make reasoned, analytical judgements, using comparisons to show the importance of research for improving outcomes and informing practice, as well as secondary sources to support points. Students will consider strengths and limitations of chosen methods. A full conclusion must be presented, drawing together positive and negative aspects of how ethical principles affect research design.

For pass standard, students must explain why research is carried out in health and social care and provide examples of issues that research addresses (for example health conditions, lifestyle factors). Students will also demonstrate their understanding of at least two research methods (for example questionnaires, interviews) and their use in health and social care. Students will select and organise information about ethical principles (consent, confidentiality, data protection).

Learning aims C and D

For distinction standard, students must select, use and interpret most of the relevant information, showing a balanced consideration of this information with minimal errors or omissions when critically evaluating how research skills contribute to the quality of outcomes. Students will provide reflection on own research process with examples. Students will critically evaluate the impact of research on provision and practice and include well-supported recommendations for further research to address gaps.

For merit standard, students will make reasoned, analytical judgements by comparing and discussing why research skills are important for producing valid and reliable findings. Students will provide evidence of applied skills in a mini research task or plan. Students must demonstrate the relevance of research findings for service improvement, using case studies or reports to support analysis.

For pass standard, students must outline appropriate secondary sources (journals, textbooks, websites) and provide a full bibliography of sources in an appendix. They must demonstrate the relevance and purpose of research skills needed (planning, time management, referencing). Students must also show an understanding of the effects of research on individuals and practitioners and of the changes to provision and practice resulting from research.

Links to other units

This unit links to:

- Unit 2: Anatomy and Physiology for Health and Social Care
- Unit 3: Promoting Public Health
- Unit 4: Principles of Safe Practice in Health and Social Care
- Unit 9: Principles of Effective Care.

Unit 6: Psychological Perspectives

Level: 3

Unit type: Pearson Set Assignment

Guided learning hours: 60

Unit in brief

Students explore key psychological theories and how they apply in health and social care, focusing on human development and behaviour. They will understand how these theories help improve mental health, manage conditions such as addiction and stress, and promote wellbeing. This unit gives students the knowledge and skills to use psychological theories in real-life care settings.

Unit introduction

Understanding psychological perspectives is essential for anyone working in health and social care. These theories explain how people think, feel and behave, and they provide a foundation for supporting individuals effectively. By exploring different approaches, you will gain insight into the factors that influence development and behaviour throughout life.

In this unit, you will learn about different psychological perspectives and how they have influenced thinking and practices within the sector. You will explore key ideas around how the mind develops, the factors that influence behaviour, and how these perspectives have led to the development of techniques and interventions, including therapeutic approaches used to manage behaviours in health and social care settings.

This unit will provide you with valuable skills for progression to higher education and employment in psychology, health and social care, nursing, medical practice or the educational sector. The knowledge and skills you develop will help you understand human development and apply psychological principles in professional settings, supporting both academic growth and career advancement.

Learning aims

In this unit you will:

A Examine how psychological perspectives contribute to the understanding of human development and behaviour

B Examine the contribution of psychological perspectives to the management and treatment of individuals' specific behaviours

C Examine how psychological perspectives are applied in health and social care settings.

Summary of unit

Learning aim	Key content areas	Assessment approach
A Examine how psychological perspectives contribute to the understanding of human development and behaviour	**A1** Principal psychological perspectives as applied to the understanding of development and behaviour **A2** Application of psychological perspectives to health and social care practice **A3** Contribution of psychological perspectives to the understanding of specific behaviours	This unit is assessed through a Pearson Set Assignment.
B Examine the contribution of psychological perspectives to the management and treatment of individuals' specific behaviours	**B1** Factors that affect human development and specific behaviours **B2** Contribution of psychological perspectives to the management of behaviours **B3** Contribution of psychological perspectives to the treatment of behaviours	
C Examine how psychological perspectives are applied in health and social care settings	**C1** Behaviour of individuals in health and social care settings **C2** Practices in health and social care settings	

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Content

The essential content is set out under content areas. Students must cover all specified content before the assessment.

Learning aim A: Examine how psychological perspectives contribute to the understanding of human development and behaviour

A1 Principal psychological perspectives as applied to the understanding of development and behaviour

- Behaviourist: role of reinforcement, conditioning, e.g. Pavlov, digital behaviourism (impact of algorithms and gamification on behaviour, e.g. social media reinforcement loops).
- Social learning: effects of other individuals, groups, culture and society on behaviour of individuals, self-fulfilling prophecy, role theory, e.g. Bandura, influence of online communities and influencers on behaviour, cyberbullying and digital identity formation.
- Psychodynamic: importance of the unconscious mind, importance of early experiences, e.g. Freud, trauma-informed care, modern neuroscience insights on unconscious processes, PTSD.
- Humanistic: Maslow's hierarchy of needs, self-actualisation, self-concept, self-esteem, e.g. Rogers, positive psychology and wellbeing frameworks (e.g. PERMA model).
- Cognitive: information processing, e.g. Piaget, impact of AI and technology on cognition, attention span and decision making; digital multitasking and cognitive overload.
- Biological: maturational theory, importance of genetic influences on behaviour, influence of nervous and endocrine systems on behaviour, e.g. Gesell, Bruce McEwen epigenetics, Eric Kandel neuroplasticity; effects of modern lifestyle factors (e.g. screen time, diet) on brain development.
- Theories of human development: nature versus nurture, continuity versus discontinuity, nomothetic versus idiographic.

A2 Application of psychological perspectives to health and social care practice

- Behaviourist, e.g. changing/shaping behaviour by operant conditioning.
- Social learning, e.g. promotion of anti-discriminatory behaviours and practices, use of positive role models in health education campaigns.
- Psychodynamic, e.g. conscious and unconscious mind in trauma-based care.
- Humanistic, e.g. client-centred therapy, putting the individual at the centre of care planning.
- Cognitive, e.g. understanding intellectual development and developmental norms, therapies such as cognitive behavioural therapy and neuro-linguistic programming.

- Biological, e.g. understanding genetic predisposition to certain illnesses or health-related behaviours; the biology of emotion, impact of substances on behaviour (e.g. effects of drugs and medication).

A3 Contribution of psychological perspectives to the understanding of specific behaviours

- Perspectives: application of complementary and contrasting psychological theories to the understanding of specific behaviours, e.g. the interaction between biological and cognitive theories in understanding depression.
- Specific behaviours associated with, e.g. anxiety and depression, separation and loss, stress and coping, self-harm, prejudice and discrimination, child abuse, addiction, violence and aggression, social media addiction, digital burnout, impact of misinformation on mental health.

Learning aim B: Examine the contribution of psychological perspectives to the management and treatment of individuals' specific behaviours

B1 Factors that affect human development and specific behaviours

- Physical.
- Social, cultural, emotional.
- Economic.
- Physical environment.
- Psychological.

B2 Contribution of psychological perspectives to the management of behaviours

- Cognitive behavioural therapy, e.g. management of phobias, mental illnesses, post-traumatic stress disorder, approaches to challenging behaviour, monitoring and improving behaviour.
- Social learning theory, e.g. use of positive role models, treatment of eating disorders.
- Role of psychodynamic perspective in, e.g. psychoanalysis, exploration of factors influencing behaviour.
- Humanistic perspective, e.g. person-centred counselling.
- Biological perspective, e.g. drugs, biofeedback.

B3 Contribution of psychological perspectives to the treatment of behaviours

- Interventions: use of perspectives to inform development of therapeutic practices.
- Therapeutic practices as relevant to behaviour, e.g. neuroscience-based therapies, group therapy, family therapy, addiction therapy, behaviour modification programmes.
- Ethical issues.
- How the therapies work.
- Reasons for attending therapy sessions.

Learning aim C: Examine how psychological perspectives are applied in health and social care settings

C1 Behaviour of individuals in health and social care settings

- Concept of role, e.g. individual receiving care, caregiver, healthcare professional.
- Conformity to minority/majority, e.g. peer influence on health behaviours.
- Influence, e.g. Asch peer pressure on health choices.
- Conformity to social roles, e.g. Zimbardo prison studies on social roles.
- Obedience, e.g. Milgram obedience studies.
- Attitude change, e.g. Festinger.
- Factors influencing hostility and aggression, e.g. the role of stress.
- Digital conformity and online peer pressure, influence of virtual environments on behaviour.

C2 Practices in health and social care settings

- Promoting independence and empowerment by respecting individual rights, e.g. working in a person-centred way.
- Value-based care, e.g. respect, dignity, equity and non-discriminatory interactions with individuals.
- Digital health tools, telehealth, data privacy considerations in care practices, e.g. the role of health apps.
- Telehealth ethics, e.g. informed consent, security of health information in virtual care settings.

Assessment criteria

Learning aim A: Examine how psychological perspectives contribute to the understanding of human development and behaviour

Learning aim B: Examine the contribution of psychological perspectives to the management and treatment of individuals' specific behaviours

Pass	Merit	Distinction
A.P1 Describe how psychological perspectives are applied to the understanding of human development. **A.P2** Describe how psychological perspectives contribute to the understanding of specific human behaviours.	**A.M1** Analyse the contribution of psychological perspectives to the understanding of human development and behaviours.	**AB.D1** Evaluate the role of psychological perspectives in the understanding of human development and the management and treatment of individuals' behaviours.
B.P3 Describe how different factors influence human development and specific behaviours. **B.P4** Explain the contribution of psychological perspectives to the management and treatment of different individuals' behaviours.	**B.M2** Analyse the value of identifying factors influencing human development and behaviours in the application of psychological perspectives to the management and treatment of different individuals' behaviours.	

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Learning aim C: Examine how psychological perspectives are applied in health and social care settings

Pass	Merit	Distinction
C.P5 Compare the application of psychological perspectives in local health and social care settings. **C.P6** Describe how professionals use psychological perspectives to improve the social functioning of selected individuals.	**C.M3** Assess the impact of the use of psychological perspectives in local health and social care settings in enabling professionals to enhance the social functioning of selected individuals.	**C.D2** Evaluate the application of psychological perspectives in local health and social care settings in enabling professionals to enhance the social functioning of selected individuals. **C.D3** Evaluate the importance of the psychological perspectives used in health and social care settings, in relation to understanding human development and managing and treating behaviours to enhance the social functioning of individuals.

Transferable skills

Managing Yourself	Effective Learning	Interpersonal Skills	Solving Problems
MY – TPR	EL – MOL	IS – WC	SP – CT
MY – PS&R	EL – CL	IS – V&NC	SP – PS
MY – COP	EL – SRS	IS – T	SP – C&I
MY – PGS	EL – PRS	IS – C&SI	

Table key

*	Signposted to indicate opportunities for development as a part of wider teaching and learning
√	Embedded in teaching, learning and assessment
blank	Not embedded or signposted in unit

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Essential information for Pearson Set Assignment (PSA)

Pearson sets the assignment for the assessment of this unit.

The PSA will take 10 hours to complete.

The PSA will be marked by centres and verified by Pearson.

Assessing the PSA

You will make assessment decisions for the PSA using the assessment criteria provided.

Section 1 gives information on PSAs and there is further information on our website.

Further information for teachers and assessors

Resource requirements

There are no special resources needed for this unit.

Essential information for assessment decisions

Learning aims A and B

For distinction standard, students will evaluate and reach reasoned and valid judgements on principal psychological perspectives relating to human development and behaviours. They must use research to justify the validity of psychological perspectives applied in health and social care practice. Students must draw on knowledge and understanding of factors that affect human development and specific behaviours. They will also draw on ethical and confidential considerations and provide justified explanations of how psychological perspectives contribute to the management and treatment of two selected individuals with different behaviours.

For merit standard, students will make reasoned, analytical judgements involving comparisons, discussions or justifications of principal psychological perspectives relating to human development and behaviours. They must use research to extend understanding of psychological perspectives applied in health and social care practice. Students must interrelate facts, theories, concepts and contexts of factors that affect human development and specific behaviours. They will also draw on ethical and confidential considerations and draw suitable conclusions about the contribution of psychological perspectives to the management and treatment of two selected individuals with different behaviours.

For pass standard, students will recall and relate knowledge through understanding a range of appropriate contexts of principal psychological perspectives relating to human development and behaviours. They must use research relevant to given situations, including using data sources on psychological perspectives applied in health and social care practice. Students must select and organise information using appropriate knowledge and concepts to make suitable judgements on factors that affect human development and specific behaviours. They will also consider ethical and confidential factors, and apply psychological perspectives to support the management and treatment of two selected individuals with different behaviours.

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Learning aim C

For distinction standard, students will articulate their arguments and views concisely and professionally to justify conclusions on the behaviour of two different individuals in health and social care settings. They must use detailed analysis and research to make recommendations and proposals on the practices in two different health and social care settings, and ensure that the appropriate practices of confidentiality are maintained.

For merit standard, students will select and apply knowledge to demonstrate relevance and purpose of the behaviour of two different individuals in health and social care settings. They must show that they understand how knowledge is applied to detailed situations involving the practices in two different health and social care settings, and ensure that the appropriate practices of confidentiality are maintained.

For pass standard, students will demonstrate an understanding of a range of appropriate contexts of the behaviour of two different individuals in health and social care settings. They must select and organise information using appropriate knowledge and concepts about the practices in two different health and social care settings, and ensure that the appropriate practices of confidentiality are maintained.

Links to other units

This unit links to:

- Unit 3: Promoting Public Health
- Unit 4: Principles of Safe Practice in Health and Social Care
- Unit 8: Sociological Perspectives
- Unit 9: Principles of Effective Care
- Unit 11: Supporting Individuals with Additional Needs
- Unit 17: Understanding Mental Wellbeing
- Unit 21: Complementary Therapies for Health and Social Care
- Unit 22: Health Psychology.

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Unit 7: Infection Prevention and Control

Level: 3

Unit type: Pearson Set Assignment

Guided learning hours: 60

Unit in brief

Students explore the causes and transmission of infections and the procedures that workers in health and social care settings follow to prevent and control infection.

Unit introduction

In today's interconnected world, infection prevention and control remain critical to safeguarding public health. Health and social care settings face evolving challenges, from emerging infectious diseases to antimicrobial resistance, requiring professionals to apply evidence-based practices and adapt to new technologies. This unit provides a foundation for understanding how infections occur, spread, and can be effectively managed.

You will explore the science behind infection transmission, the role of environmental and social factors, and the practical measures used to reduce risk. The unit also introduces modern approaches such as digital infection surveillance, sustainable hygiene practices, and the use of innovative personal protective equipment (PPE). Real-world case studies, including recent global health events, will help you connect theory to practice.

Progressing through this unit will equip you with essential skills for health and social care careers and prepare you for advanced study in related fields. You will develop practical competence in infection control procedures, critical thinking for risk assessment, and an understanding of organisational responsibilities. These skills are highly valued by employers and provide a strong foundation for roles in nursing, public health and clinical support, as well as progression to higher education in health sciences.

Learning aims

In this unit you will:

A Understand the causes of infections and transmission of infection

B Explore how to prevent and control the transmission of infection in health and social care settings

C Investigate the policies, procedures, roles and responsibilities of health and social care organisations and workers in preventing and controlling infections.

Summary of unit

Learning aim	Key content areas	Assessment approach
A Understand the causes of infections and transmission of infection	**A1** Causes of infection **A2** Types of infection and resulting diseases **A3** Emerging infectious diseases and global health **A4** Ways infections are transmitted **A5** Cultural competence and health inequalities	This unit is assessed through a Pearson Set Assignment.
B Explore how to prevent and control the transmission of infection in health and social care settings	**B1** The use of standard procedures to prevent infection in health and social care settings **B2** Digital infection control and technology integration **B3** Sustainability and environmental impact of infection control practices **B4** Decontamination techniques **B5** Advanced PPE and innovation	
C Investigate the policies and procedures, roles and responsibilities of health and social care organisations and workers in preventing and controlling infections	**C1** Organisational policies and procedures to minimise infections in health and social care settings **C2** Roles and responsibilities of health and social care workers **C3** Cybersecurity and infection data	

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Content

The essential content is set out under content areas. Students must cover all specified content before the assessment.

Learning aim A: Understand the causes of infections and transmission of infection

A1 Causes of infection

- Agents of infection, to include bacteria, viruses, parasites, fungi.
- Reservoirs of infection, to include other people, organisms, spore/cyst formation.
- Carriers of infection, to include water-borne diseases, vector- (insect-) borne diseases, human contact, contact with infected animals, raw or infected food.

A2 Types of infection and resulting diseases

- Types of infection, to include systemic infection, localised infection.
- Symptoms of diseases transmitted through:
  - fungi, e.g. tinea pedis, tinea corporis
  - viruses, e.g. influenza, common cold, norovirus, hepatitis B, hepatitis C, poliomyelitis, MERS-CoV
  - bacteria, e.g. MRSA, tetanus, tuberculosis, cholera, diphtheria, salmonellosis
  - vector-borne diseases, e.g. malaria, Alkhumra haemorrhagic fever, Crimean-Congo haemorrhagic fever, yellow fever.

A3 Emerging infectious diseases and global health

- Real-world application of infection control for recent pandemics, e.g. COVID-19.
- Global health threat and its implications for care settings – antimicrobial resistance (AMR).

A4 Ways infections are transmitted

- Conditions needed for growth of micro-organisms – warmth, moisture, nutrients.
- Factors aiding transmission, including:
  - susceptibility of the host, e.g. age, nutrition, lifestyle
  - environmental factors – climate, vector presence, sanitation, pollution
  - social factors – poverty, housing conditions, nutrition, travel/migration.
- How infective agents can be transmitted and enter the body, to include:
  - food-borne diseases resulting from poor food hygiene, e.g. salmonellosis, norovirus
  - water-borne diseases resulting from unclean water supplies, e.g. poliomyelitis, cholera
  - transmission through droplet infection, e.g. influenza, common cold, tuberculosis, diphtheria
  - transmission through body fluids, e.g. hepatitis B, hepatitis C

- transmission of vector-borne diseases through bites from infected arthropods, e.g. malaria, Alkhumra haemorrhagic fever, Crimean-Congo haemorrhagic fever, yellow fever.

A5 Cultural competence and health inequalities

- Social determinants of infection risk: poverty, housing, access to healthcare.
- Inclusive communication strategies for diverse populations during infection prevention campaigns.

Learning aim B: Explore how to prevent and control the transmission of infection in health and social care settings

B1 The use of standard procedures to prevent infection in health and social care settings

- Cleanliness, including hand-washing techniques, use of antiseptics and alcohol gels, use of washing facilities, maintaining a clean environment, maintaining equipment in the setting.
- Appropriate food-handling practices for preparing, cooking, serving and storing food, including chilling/freezing, wrapping, storage times post-preparation, food storage temperatures, defrosting, use-by dates, prevention of cross-contamination.
- Correct handling and disposal of waste, e.g. spillages, soiled laundry management, household waste, sharps, clinical/hazardous waste, biological spillages, correct handling and disposal of waste using the correct colour-coded bag or bin.
- Use of PPE: purpose, correct practice for application, use and disposal.

B2 Digital infection control and technology integration

- Digital tools: use of electronic health records (EHR) for infection tracking, AI-driven outbreak prediction, digital contact tracing.
- Telehealth considerations: infection control protocols for remote consultations and home care.

B3 Sustainability and environmental impact of infection control practices

- Eco-friendly infection control practices: sustainable PPE, waste reduction strategies, green cleaning products.
- Climate change and infection risk (e.g. vector-borne diseases spreading to new regions).

B4 Decontamination techniques

- Following organisational policy on decontamination.
- Role of PPE.
- Three steps of the decontamination process – cleaning, disinfection, sterilisation.

- Importance of cleaning, disinfection and sterilisation; differences between the contamination risks:
  - low risk, e.g. floors, furniture, mobility aids
  - medium risk, e.g. bedpans, urinals, commodes
  - high risk, e.g. instruments used for invasive techniques.

B5 Advanced PPE and innovation

- New PPE technologies (e.g. reusable respirators, antimicrobial fabrics).
- Automation in decontamination: UV disinfection robots, touchless systems.

Learning aim C: Investigate the policies and procedures, roles and responsibilities of health and social care organisations and workers in preventing and controlling infections

C1 Organisational policies and procedures to minimise infections in health and social care settings

- Impact of relevant legislation on organisational policies and procedures.
- Roles of organisations in preventing and controlling infections, to include: provision of worker training, provision of correct equipment, production of policy on decontamination in line with national guidelines, legislation and regulations.
- Ensuring policies and procedures are in place and are followed, for example:
  - documentation and record keeping
  - reporting outbreaks of infectious diseases
  - admissions and transfer of patients with infections
  - collection, handling and storing of specimens, e.g. blood, urine, saliva, sputum, faeces
  - personal hygiene procedures, e.g. World Health Organization (WHO) hand hygiene guidelines
  - food hygiene procedures
  - correct use of PPE
  - disposal of waste procedures
  - ensuring visitors comply with hygiene policies and procedures.

C2 Roles and responsibilities of health and social care workers

- The role of health and social care workers, formal and informal carers, specialist infection control workers, e.g. infection prevention and control nurses, environmental health officers, work of health protection and public health services.

- Following policies and procedures, for example:
  - cleaning and clearing work areas
  - decontamination procedures
  - record keeping and documentation in relation to infection
  - reporting infectious or notifiable diseases and outbreaks, accidents and near accidents
  - preparing food and cooking in the setting, including correct temperature, preserving nutritional value, ensuring food safety
  - following the correct dress code, accessories, permitted footwear, use of PPE
  - admissions, transfers and discharges of individuals
  - procedures following the death of an individual
  - handling, collection and storing of specimens and body fluids, e.g. blood, urine, saliva, sputum, faeces, vomit, wound swabs
  - personal hygiene procedures, e.g. WHO hand hygiene guidelines
  - ensuring all visitors comply with hygiene policies and procedures.
- Protection of individuals receiving care:
  - primary protection, e.g. immunisation, prophylactic drug treatment, national health initiatives
  - secondary protection, e.g. screening, microbiological examinations of specimens and tissue samples.

C3 Cybersecurity and infection data

- Data protection when handling infection-related records.
- Ethical considerations in digital infection surveillance.

Assessment criteria

Learning aim A: Understand the causes of infections and transmission of infection

Pass	Merit	Distinction
A.P1 Explain the causes of different infections and the diseases that can result from them. **A.P2** Explain how these diseases can be transmitted and contracted.	**A.M1** Assess how the transmission and contraction of infectious diseases can be influenced by different factors. [SP – PS]	**A.D1** Analyse potential ways in which infections are caused, transmitted and disease is contracted.

Learning aim B: Explore how to prevent and control the transmission of infection in health and social care settings

Pass	Merit	Distinction
B.P3 Demonstrate the correct use of standard procedures to prevent infection in a health or social care setting. [EL – MOL] **B.P4** Demonstrate correct decontamination techniques in a health or social care setting. **B.P5** Review how successfully use of own techniques prevented and controlled infection.	**B.M2** Demonstrate the correct use of procedures to prevent and control infection, adapting them for different situations.	**B.D2** Justify the procedures and techniques selected and adapted to prevent and control infection with reference to the different situations.

Learning aim C: Investigate the policies and procedures, roles and responsibilities of health and social care organisations and workers in preventing and controlling infections

Pass	Merit	Distinction
C.P6 Explain how organisational policies and procedures apply legislation to prevent the transmission of different infections in a named health or social care organisation. **C.P7** Explain the roles and responsibilities of different health and social care workers in preventing and controlling infection in a named health or social care organisation.	**C.M3** Analyse how, by implementing and following infection control policies and procedures, the health or social care organisation and workers help to prevent the transmission of infection.	**C.D3** Evaluate how policies and procedures, and workers' roles and responsibilities in a named health or social care organisation, successfully prevent and control the transmission of infection.

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Transferable skills

Managing Yourself	Effective Learning	Interpersonal Skills	Solving Problems
MY – TPR	EL – MOL √	IS – WC	SP – CT
MY – PS&R	EL – CL	IS – V&NC	SP – PS √
MY – COP	EL – SRS	IS – T	SP – C&I
MY – PGS	EL – PRS	IS – C&SI	

Table key

*	Signposted to indicate opportunities for development as a part of wider teaching and learning
√	Embedded in teaching, learning and assessment
blank	Not embedded or signposted in unit

Essential information for Pearson Set Assignment (PSA)

Pearson sets the assignment for the assessment of this unit.

The PSA will take 12 hours to complete.

The PSA will be marked by centres and verified by Pearson.

Assessing the PSA

You will make assessment decisions for the PSA using the assessment criteria provided.

Section 1 gives information on PSAs and there is further information on our website.

Further information for teachers and assessors

Resource requirements

For this unit, students will explore the roles and responsibilities of health and social care workers in relation to infection prevention and control. They would benefit from the opportunity to hear directly from professionals working in a variety of health and social care settings to understand how infection control is managed. This could be achieved either by visiting health and social care settings or by inviting guest speakers into the centre.

Students should be able to follow and carry out procedures to prevent and control infection, including decontamination procedures, and may demonstrate their skills under simulated conditions. For this to be achieved, centres will need to provide relevant scenarios and equipment.

Students must have access to relevant legislation relating to infection control. All legislation must be up to date and applicable to the student's national location.

Students must also have access to relevant professional codes of practice, applicable to their national location.

Students must have access to example policies and procedures from real health and social care settings that relate to infection prevention and control.

Essential information for assessment decisions

Learning aim A

For distinction standard, students will analyse the transmission of infections, including conditions for the growth of micro-organisms, contributing factors and the transmission of infectious agents. Students must articulate arguments concisely and professionally and use detailed analysis and research to reach valid conclusions.

For merit standard, students will assess how different factors can influence the transmission and contraction of these infections, including host, environmental and social factors. Students will draw suitable conclusions relating to the conditions for growth of micro-organisms, factors aiding transmission, and how infective agents enter the body. Students must use information from different relevant sources in their assessment of influencing factors.

For pass standard, students will explain how organisms cause infection, the diseases that result, the symptoms of each, and how they are transmitted and contracted. Students must clearly link the cause of infection to the resulting disease and explain how it is transmitted and contracted. Students must use research that is relevant to health or social care situations, including data relating to the causes and transmission of infections, to reach suitable judgements.

Learning aim B

General note

The skills required for this assignment can be demonstrated under simulated conditions.

For distinction standard, students will show they have developed, applied and improved their infection control skills, and how they used these skills in more complex situations, for example situations where several procedures must be followed to protect different individuals and staff from infection (personal hygiene procedures, ensuring surfaces and equipment are free of infection, disposing of waste). Students must make valid judgements about the risks and limitations of the techniques and procedures used in different situations, and justify how they used the most appropriate techniques and procedures in the context of infection control.

For merit standard, students will select and carry out infection control and decontamination procedures with increased confidence for different health or social care situations. Students must be observed selecting and carrying out the correct procedures for each situation, and modifying them appropriately.

For pass standard, students will be observed selecting and deploying appropriate techniques correctly and safely. They must be observed selecting and carrying out decontamination techniques for well-defined situations, such as decontaminating floors or furniture. They must seek feedback on how successfully they used the techniques.

Learning aim C

General note

This assignment could be based on a named health or social care setting.

The evidence should cover the roles and responsibilities of formal carers such as nurses or support workers.

For distinction standard, students will draw on and bring together knowledge from across the learning aims. They must assess infection prevention and control procedures for different health or social care situations and evaluate the procedures workers use to prevent and control infection. Students must provide details of the useful aspects of the procedures and how workers in the setting put these aspects into practice. Students must reach conclusions using professional vocational language.

For merit standard, students will identify responsibilities of different staff members involved in infection prevention and control, and justify the procedures followed in relation to these responsibilities. Students must apply their knowledge to detailed situations, which may require several procedures to be put into effect, such as hygiene procedures, reporting and recording outbreaks of infection, and the use of PPE. Students must interrelate facts, theories and concepts to reach a valid conclusion and use vocational language relevant to the context.

For pass standard, students will explain how policies and procedures used in the setting apply legislation to control infections and prevent their transmission among individuals and service providers. Students will explore the responsibilities of workers in relation to infection control in well-defined situations within the setting, such as food preparation procedures. Students must use relevant vocational language.

Links to other units

This unit links to:

- Unit 2: Anatomy and Physiology for Health and Social Care
- Unit 3: Promoting Public Health
- Unit 4: Principles of Safe Practice in Health and Social Care.

This unit may be taught alongside:

- Unit 5: Enquiries into Current Research in Health and Social Care
- Unit 10: Physiological Disorders and their Care
- Unit 12: Microbiology for Health Science.

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Unit 8: Sociological Perspectives

Level: 3

Unit type: Pearson Set Assignment

Guided learning hours: 60

Unit in brief

Students explore the application of sociological approaches to health and social care, and explore social inequities, demographic changes and patterns and trends in social groups.

Unit introduction

Sociology will lead you to question many of the attitudes you hold and the assumptions you make about society and individuals who have care and support needs. To work effectively in health and social care, you need to be familiar with sociologists' research findings and be able to apply a sociological understanding to your practice.

You will gain an understanding of the different sociological perspectives and concepts and consider how these can be applied to health and social care. You will examine what is meant by health, and how the definitions and models used by health and social care professionals affect individuals. By examining inequities in society, you will be better equipped to understand and support individuals who come from different social groups. You will explore recent changes to the approach to treatment, diagnosis and care in health and social care.

These activities will help you gain the skills necessary for progression to higher education in many subject areas through the development of research skills and analysis of different views and perspectives. It will also support progression into different career paths, including social work, care work, community support work and nursing.

Learning aims

In this unit you will:

A Understand how sociological concepts and perspectives are applied to the study of health and social care

B Examine how sociological approaches support understanding of models and concepts of health

C Examine how social inequities, demographic change, and patterns and trends affect health and social care delivery.

Summary of unit

Learning aim	Key content areas	Assessment approach
A Understand how sociological concepts and perspectives are applied to the study of health and social care	**A1** Concepts and terminology used within sociology **A2** The key sociological perspectives	This unit is assessed through a Pearson Set Assignment.
B Examine how sociological approaches support understanding of models and concepts of health	**B1** The biomedical model of health and alternatives **B2** The concepts of health, ill health and disability	
C Examine how social inequities, demographic change, and patterns and trends affect health and social care delivery	**C1** Inequities within society **C2** Demographic change and data **C3** Patterns and trends in health and ill health within social groups **C4** Global perspectives	

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Content

The essential content is set out under content areas. Students must cover all specified content before the assessment.

Learning aim A: Understand how sociological concepts and perspectives are applied to the study of health and social care

A1 Concepts and terminology used within sociology

- Diversity of culture and identity:
  - socialisation, including norms, values and roles
  - social class
  - race and ethnic or national origin
  - gender
  - age
  - region
  - religion or belief systems
  - sexual orientation
  - disability.
- The main social institutions:
  - family networks
  - education
  - health and social care services.

A2 The key sociological perspectives

Students must understand strengths and limitations of each perspective in relation to society.

- The main sociological perspectives in relation to society:
  - functionalism
  - conflict, including feminism
  - social action, including interactionism
  - postmodernism
  - intersectionality.
- Digital sociology: how digital technologies and social media influence identity, socialisation and health behaviours.

Learning aim B: Examine how sociological approaches support understanding of models and concepts of health

B1 The biomedical model of health and alternatives

- The biomedical model:
  - origins and significance
  - criticisms
  - implications for professionals and individuals who have care and support needs.
- The alternatives:
  - social
  - complementary
  - digital health models: digital therapeutics, AI within clinical decision support.

B2 The concepts of health, ill health and disability

- Physical and mental ill health and disability as social and biological constructs.
- Definitions of health, including WHO, holistic, positive and negative.
- Medicalisation.
- The sick role.
- Clinical iceberg.

Learning aim C: Examine how social inequities, demographic change, and patterns and trends affect health and social care delivery

C1 Inequities within society

- Individuals experience inequity in terms of:
  - social class
  - race and ethnic or national origin
  - age
  - gender
  - disability
  - sexual orientation
  - region.
- Different social groups experience inequities through:
  - stereotyping
  - prejudices
  - labelling
  - attitudes, including individual and societal biases
  - discrimination
  - marginalisation.
- Climate change and health inequities: how environmental factors and climate change disproportionately affect vulnerable populations.
- Post-pandemic health disparities: the impact of COVID-19 on different social groups, including long COVID and access to healthcare.

- Cost-of-living crisis: how economic instability affects health outcomes and access to services.

C2 Demographic change and data

- Demographic change:
  - birth and death rates
  - family and household size
  - migration
  - ethnic composition
  - life expectancy.
- Uses of demographic data:
  - assessing the potential needs of the population
  - planning/targeting services.
- Real-time data and predictive analytics: how health services use predictive modelling with big data to plan and deliver care.
- Changing family structures: rise of single-parent households, cohabitation, and chosen families in demographic discussions.

C3 Patterns and trends in health and ill health within social groups

- Mortality rates, suicide rates, incidence and prevalence of disease and illness.
- Difficulties in measuring health.
- Local or national patterns and trends of care for different groups in society.
- Marketisation of health and social care.

C4 Global perspectives

- Global health inequities: health outcomes across countries and the impact of globalisation, migration and international policy.
- Cultural competency: the importance of culturally responsive care in increasingly diverse societies.

Assessment criteria

Learning aim A: Understand how sociological concepts and perspectives are applied to the study of health and social care

Learning aim B: Examine how sociological approaches support understanding of models and concepts of health

Pass	Merit	Distinction
A.P1 Explain how sociological perspectives are applied to the understanding of health and social care and society.	**A.M1** Analyse the contribution of sociological perspectives to the understanding of health and social care and society.	**AB.D1** Evaluate the role of sociological perspectives in the understanding of society and models and concepts of health in relation to service provision in a local health and social care setting.
B.P2 Compare the biomedical model of health with an alternative model of health. **B.P3** Explain the contribution of concepts of health, ill health and disability to service provision in a local health and social care setting.	**B.M2** Analyse how the biomedical and an alternative model of health, and concepts of health, ill health and disability, affect service provision in a local health and social care setting.	

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Learning aim C: Examine how social inequities, demographic change, and patterns and trends affect health and social care delivery

Pass	Merit	Distinction
C.P4 Explain how social inequity affects different groups in society. **C.P5** Explain how demographic data is used in service provision in a local health and social care setting. **C.P6** Explain patterns and trends in health and ill health within different social groups.	**C.M3** Analyse the impact of social inequity on different groups in society. **C.M4** Analyse the impact of the use of demographic data in a local health and social care setting in enabling the enhancement of service provision for different social groups.	**C.D2** Evaluate sociological explanations for patterns and trends of health and ill health in different social groups, and how demographic data is used in service provision in a local health and social care setting to reduce social inequity affecting those groups. **C.D3** Evaluate the importance of the sociological perspectives used in a health and social care setting in relation to understanding society, reducing social inequity and improving service provision for different social groups.

Transferable skills

Managing Yourself	Effective Learning	Interpersonal Skills	Solving Problems
MY – TPR	EL – MOL	IS – WC	SP – CT
MY – PS&R	EL – CL	IS – V&NC	SP – PS
MY – COP	EL – SRS	IS – T	SP – C&I
MY – PGS	EL – PRS	IS – C&SI	

Table key

*	Signposted to indicate opportunities for development as a part of wider teaching and learning
√	Embedded in teaching, learning and assessment
blank	Not embedded or signposted in unit

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Essential information for Pearson Set Assignment (PSA)

Pearson sets the assignment for the assessment of this unit.

The PSA will take 10 hours to complete.

The PSA will be marked by centres and verified by Pearson.

Assessing the PSA

You will make assessment decisions for the PSA using the assessment criteria provided.

Section 1 gives information on PSAs and there is further information on our website.

Further information for teachers and assessors

Resource requirements

There are no special resources needed for this unit.

Essential information for assessment decisions

Learning aims A and B

For distinction standard, students will evaluate and reach reasoned and valid judgements on concepts and terminology used in sociology. They must use research to justify the validity of the key sociological perspectives. Students must draw on knowledge and understanding of the biomedical model of health and alternatives. They must evaluate the concepts of health, ill health and disability to reach reasoned and valid judgements.

For merit standard, students will make reasoned, analytical judgements involving comparisons, discussions or justifications of concepts and terminology used within sociology. They must use research to extend understanding of the key sociological perspectives. Students must interrelate facts, theories, concepts and contexts of the biomedical model of health and alternatives, drawing suitable conclusions. They must make reasoned, analytical judgements involving discussion on the concepts of health, ill health and disability.

For pass standard, students will recall and relate knowledge through understanding a range of appropriate contexts of sociological concepts and terminology. They must use research relevant to the given situations, including data sources on key sociological perspectives. Students must select and organise information using appropriate knowledge and concepts to make suitable judgements on the biomedical model of health and alternatives, and the concepts of health, ill health and disability.

Learning aim C

For distinction standard, students will draw on research information to deepen their understanding and arrive at original and valid conclusions on inequities within society. They must articulate arguments and views concisely and professionally to justify conclusions on demographic change and data. Students must use detailed analysis and research to make recommendations and proposals on patterns and trends in health and ill health within at least two social groups.

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For merit standard, students will record information effectively from a wide range of sources or sources of particular relevance to enable detailed or wide-ranging analysis of inequities within society. They must select and apply knowledge to demonstrate the relevance and purpose of demographic change and data. Students must show that they understand how knowledge is applied to detailed situations in relation to patterns and trends in health and ill health within at least two social groups.

For pass standard, students will plan and carry out research using appropriate search and analysis techniques to understand inequities within society. They must recall and relate knowledge through understanding a range of appropriate contexts of demographic change and data. Students must select and organise information using appropriate knowledge and concepts about patterns and trends in health and ill health within at least two social groups.

Links to other units

This unit links to:

- Unit 6: Psychological Perspectives
- Unit 11: Supporting Individuals with Additional Needs
- Unit 13: Policy in Health and Social Care.

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Unit 9: Principles of Effective Care

Level: 3

Unit type: Internal

Guided learning hours: 60

Unit in brief

Students explore the principles that underpin high-quality care and support in health and social care settings, examining how services are organised and shaped by guidance. Students consider how social determinants influence health outcomes and the importance of promoting equity, diversity and inclusion in practice.

Unit introduction

To meet individual needs effectively, it is essential to understand the principles that underpin high-quality care and support. This unit introduces the principles that form the foundation of professional standards, skills and attributes required in health and social care practice, and explores how these should be applied to meet the diverse needs of individuals.

In this unit, you will learn about the values, skills and approaches involved in delivering person-centred care, including effective communication, confidentiality and duty of care. You will look at how organisations and guidance inform service delivery and influence standards of practice. You will also examine how social determinants affect health outcomes and the importance of promoting equity, diversity and inclusion to reduce barriers and improve wellbeing.

The knowledge and understanding gained in this unit will prepare you for further study in fields such as nursing, social work and health service management, and enhance your ability to contribute effectively within integrated care systems.

Learning aims

In this unit you will:

A Understand the principles of health and social care practice which underpin meeting the care and support needs of individuals

B Examine how organisations and guidance inform practice in health and social care

C Examine how social determinants affect the health status of individuals and the importance of equity, diversity and inclusion in practice.

Summary of unit

Learning aim	Key content areas	Assessment approach
A Understand the principles of health and social care practice which underpin meeting the care and support needs of individuals	**A1** Values essential to health and social care practice **A2** Person-centred care and approaches **A3** Communication in health and social care **A4** Confidentiality **A5** Duty of care **A6** Working with vulnerable children and adults at risk	Students will present information on the challenges in providing person-centred care, using effective communication and responding to safeguarding concerns.
B Examine how organisations and guidance inform practice in health and social care	**B1** Organisations and guidance affecting health and social care services **B2** Organisation of health and social care services **B3** How health and social care services are organised to benefit the population **B4** Using critical thinking skills to draw valid conclusions	Students will present information on the effectiveness of interagency working when following the requirements of organisations and guidance.
C Examine how social determinants affect the health status of individuals and the importance of equity, diversity and inclusion in practice	**C1** The effect of social determinants on individuals' health status **C2** Improving health outcomes in practice **C3** Potential barriers to improving health outcomes in practice	Students will present information on the factors affecting the health of individuals and the importance of equity, diversity and inclusion in health and social care practice.

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Content

The essential content is set out under content areas. Students must cover all specified content before the assessment.

Learning aim A: Understand the principles of health and social care practice which underpin meeting the care and support needs of individuals [IS – WC] [IS – V&NC]

A1 Values essential to health and social care practice

- WHO Values Charter – trusted to serve public health at all times, professionals committed to excellence in health, persons of integrity, collaborative colleagues and partners, people caring about people.
- International Charter for Human Values in Healthcare – compassion, respect for persons, commitment to integrity and ethical practice, commitment to excellence, justice in healthcare.
    - Country-specific values – key values that guide health and social care practice in own country as defined by national organisations and regulatory bodies.

A2 Person-centred care and approaches

- All health and social care professionals work towards a standard of care to include: individuality, choice, independence, rights, privacy.
- Importance of people skills – empathy, patience, engendering trust, flexibility, sense of humour, negotiation skills, honesty, problem-solving skills.
- The importance of empowering individuals with care/support needs and to actively participate in planning their own care.
- Use of care/support plans, electronic health records:
    - record of care and/or support that must be provided for an individual
    - required record in all health and social care environments
    - informed by an individual's preferences, needs, values
    - up-to-date records ensure information is shared between colleagues – shift changes, staff changes across multiple teams.
- Supporting individuals to raise concerns regarding the ongoing delivery of their care and using appropriate channels of support.

A3 Communication in health and social care

- Types of communication to include: verbal, non-verbal, written, digital (online tools).
- Importance of communication to provide person-centred care – providing accurate information; supporting privacy and dignity; using listening skills; avoiding jargon, slang and acronyms; providing empathy and emotional support.

- The importance of effective communication with colleagues and other professionals:
  - to include collaboration, open communication, coordination of responsibilities, shared decision making, shared responsibility for planning and problem solving.
- Adapting communication according to the needs of individuals – learning disabilities, dementia, sensory impairments.
- How good communication may impact outcomes for individuals:
  - individuals are more likely to share important information
  - professionals can provide clear and understandable information to individuals and across teams
  - motivates individuals to follow their treatment plans
  - individuals are more likely to follow advice and guidance on living a healthy lifestyle
  - positively influencing a person's mental state and wellbeing.
- How poor communication may impact outcomes for individuals:
  - increases in harm, length of stay and resource use, as well as affecting staff morale
  - professionals involved in care may not have the most up-to-date information
  - too late to implement effective treatment or care if communication is delayed
  - records are not consistently complete and accurate
  - important issues may remain unresolved, until the point of urgency.
- Digital communication:
  - current ways digital tools are used to communicate in practice – to include at-home monitoring, virtual wards and video consultation/check-ups
  - improves person-centred care – choose the types of digital communication that work well, for whom, where, when
  - benefits to professionals to include: time efficiency, enhances face-to-face engagement, opportunities to provide reassurance to individuals, develop and maintain relationships with individuals, may help to catch problems/changes early
  - benefits to individuals to include: increases access to services, professionals, health information and education; improves confidence in managing own health; improves independence and experience of service provision; ease of providing interpretation services
  - considerations of digital communication to include costs to individuals, ethical issues, safety of information shared (to include cybersecurity), digital literacy of staff and individuals.

A4 Confidentiality

- Importance of keeping person-identifiable or sensitive information confidential, to include information stored on behalf of colleagues and individuals.
- Importance of sharing confidential information when it is needed for the safe and effective care of an individual.

- Sharing information and managing confidentiality – sharing should be necessary, proportionate, relevant, accurate, timely, secure.
- The importance of ensuring permission is acquired from an individual to share their records with family, friends, carers.
- Professionals must follow organisational policies and procedures to protect information, including when and how to share records, how to report concerns, how records should be recorded, stored and shared, whistleblowing where needed.
- Awareness of the consequences for breaching confidentiality, to include disciplinary action and criminal charges.

A5 Duty of care

- Legal obligation of all health and social care professionals to protect the wellbeing of individuals in their care and prevent harm.
- Professionals must always act in the best interests of the individual, and their family/carers, using services.
- Individuals' records are up to date and accurate, and information is shared with the relevant teams/ professionals.
- Professionals must work to agreed national standards of care, to include those set by regulators.
- Requirement that regulated professionals follow codes of conduct and codes of ethics set by the regulator, to include nurses and midwives, allied health professionals, social workers.
- Managing dilemmas that may arise about duty of care:
    - follow policies and procedures to protect individuals, self, colleagues
    - mental capacity assessments – the meaning of capacity, the importance of supporting individuals to make independent, informed decisions about their care/support
    - positive risk taking – working with individuals to address the risks in relation to their needs, and the care and support given
    - report any concerns about the wellbeing of individuals, working conditions, faulty equipment, as soon as possible
    - report any incidents to line managers/shift leaders as soon as possible
    - use reporting procedures to disclose any concerns about abuse, neglect or unprofessional behaviour.

A6 Working with vulnerable children and adults at risk

- Vulnerabilities – refer to the definition of vulnerable children and adults at risk used in own country.
- The importance of protecting an individual's right to live in safety, free from abuse and neglect.

- Working to prevent harm and reduce the risk of abuse or neglect to those with care and support needs.
- Safeguarding individuals in a way that supports them making choices and having control in how they choose to live their lives.
- All health and social care professionals must follow agreed policies and procedures that relate to the safeguarding of children and adults at risk.
- The importance of following organisational policies and procedures when documenting and reporting safeguarding concerns.
- Awareness of the roles and responsibilities of individuals and organisations to safeguard individuals of all ages.
- The importance of multi-agency working for vulnerable individuals.

Learning aim B: Examine how organisations and guidance inform practice in health and social care

B1 Organisations and guidance affecting health and social care services

Students need to be aware of the key national organisations and bodies relevant to their own country that set standards and support health and social care services.

- Roles and responsibilities of key organisations:
  - organisations that govern overall health and social care practice
  - inspection and regulatory organisations
  - professional regulatory bodies – to include nurses and midwives, allied health professionals, social workers
  - organisations that support practice, workforce development and professional standards.
- Key guidance that informs practice and its purpose relevant to own country that covers principles relating to:
  - protecting rights, equity, inclusion
  - safeguarding and protection from harm
  - ensuring health and wellbeing through quality care
  - maintaining confidentiality and data protection.

B2 Organisation of health and social care services

Students need to be aware of the function of different types of health and social care services.

- Primary care: general practice (GP), pharmacy, dentistry.
- Secondary care: urgent and emergency care – to include physical and mental health care, planned or elective care, emergency care.
- Tertiary care: highly specialist care – neurosurgery, transplants, secure forensic mental health services.

- Community health: sexual health clinics, smoking cessation clinics, health visitors.
- Social care: care homes (with/without nursing support), at-home (domiciliary) care, rehabilitation services.
- Palliative and end-of-life care.
- Learning disabilities care.
- Virtual wards, virtual hospitals.

B3 How health and social care services are organised to benefit the population

Students need to investigate how the core principles of integrated care are implemented in own country in relation to the services listed above.

- WHO Framework on Integrated People-Centred Health Services.
- Purpose of integrated care systems:
  - bring health and social care organisations together
  - make best use of collective resources so individuals receive appropriate care as quickly as possible
  - improve outcomes in population health and healthcare
  - reduce inequities in outcomes, experience, access
  - support individuals with multiple needs, mental health issues or long-term conditions to stay well and independent.
- Benefits and challenges of inter-agency collaboration.
- How integrated care can improve health outcomes.

B4 Using critical thinking skills to draw valid conclusions

- Questioning relevance of information and challenging own biases.
- Breaking information into parts and identifying relationships and connections.
- Identifying strengths and weaknesses of information and why information is significant.
- Drawing valid conclusions supported by structured reasoning.

Learning aim C: Examine how social determinants affect the health status of individuals and the importance of equity, diversity and inclusion in practice

C1 The effect of social determinants on individuals' health status

- Health status of individuals determined by the following factors:
  - health status: the physical and mental health status of a person, group or population
  - access to care: timely, appropriate, easy to get to and use, available services meeting the choice and needs of an individual
  - quality and experience of care
  - behavioural risks to health: smoking rates, poor diet, physical inactivity, harmful alcohol consumption

  - wider determinants of health: quality of housing, income, education, access to green space, healthy food, the work individuals do.
- Social and environmental factors affecting health status and health outcomes:
  - socio-economic factors: to include income, the influence of deprivation
  - geography: differences in region, urban, rural
  - individual characteristics, including those protected by law, age, disability, neurodiversity, ethnicity, religion and belief, sexual orientation, gender and gender identity, pregnancy and maternity, education, economic status.
- The importance of recognising the role of intersectionality of social determinants and factors affecting health outcomes in determining an individual's health status.

C2 Improving health outcomes in practice

Students need to understand equity, diversity and discrimination in relation to the approach of professionals in health and social care practice, and how inclusive practice may impact on health outcomes.

- Definition of equity, diversity and discrimination (direct and indirect).
- Importance of inclusion in practice: to include using person-centred approaches to record and act on the unique needs, choices and preferences of individuals.
- The importance of equity, diversity and inclusion for professionals in practice:
  - improved efficiency, effective running of services
  - increased levels of productivity
  - improved innovation
  - reduction in absence
  - impact of recruiting and retaining a diverse workforce – better understanding of different cultures, increases the representation of identities in the local community and at all levels of employment
  - demonstrate cultural competence – in accordance with expectations of regulators of health and social care.
- The importance of equity, diversity and inclusion for individuals using services:
  - improved quality of care – needs and choices are more likely to be met
  - levels of satisfaction with care received
  - culturally sensitive/appropriate needs being met.

C3 Potential barriers to improving health outcomes in practice

Students need to understand potential discrimination as it relates to health and social care practice.

- Recognition of common forms of discrimination, to include: unconscious bias, othering, labelling, prejudice, stereotyping.
- Professionals and individuals can be discriminated against based on multiple characteristics.
- Challenge discrimination in practice:
  - awareness of intersectionality – intersecting identities can lead to less favourable, or more favourable, treatment for some individuals compared to others
  - promote inclusion in information, images, resources
  - use organisational policy and procedure to report and challenge discriminatory practice
  - support individuals using health and social care services to report and challenge discrimination.

Assessment criteria

Learning aim A: Understand the principles of health and social care practice which underpin meeting the care and support needs of individuals

Pass	Merit	Distinction
A.P1 Explain how professionals apply person-centred approaches to meet care and support needs for two individuals with different needs. **A.P2** Explain implications of duty of care in health and social care practice.	**A.M1** Assess the methods and strategies professionals might use when building relationships and establishing trust with two individuals with care and support needs. **A.M2** Assess the importance of balancing individual rights and choices with a duty of care when providing care and support for individuals with different needs.	**A.D1** Evaluate the methods and strategies used by professionals to overcome challenges in providing person-centred care that meets the needs of two individuals.

Learning aim B: Examine how organisations and guidance inform practice in health and social care

Pass	Merit	Distinction
B.P3 Explain the influence of organisations and guidance on practice with health and social care services. **B.P4** Explain how different health and social care services work together to meet care and support needs of two individuals with different needs. [IS – T]	**B.M3** Analyse the impact of organisations and guidance on health and social care services working together to meet the needs of two individuals with different needs.	**B.D2** Evaluate the effectiveness of health and social care services working together to meet the care and support needs of two individuals with different needs.

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Learning aim C: Examine how social determinants affect the health status of individuals and the importance of equity, diversity and inclusion in practice

Pass	Merit	Distinction
C.P5 Explain factors that may affect the health status of two individuals with different needs. **C.P6** Explain importance of equity, diversity and inclusion in practice to improve the health outcomes of two individuals with different care needs. [IS – C&SI]	**C.M4** Analyse how working in an inclusive way in practice impacts on the factors and potential barriers that may affect the health outcomes of two individuals with different care needs.	**C.D3** Evaluate success of approaches to inclusive working practices in improving the health outcomes and overcoming potential barriers of two individuals with different needs.

Transferable skills

Managing Yourself	Effective Learning	Interpersonal Skills	Solving Problems
MY – TPR	EL – MOL	IS – WC *	SP – CT
MY – PS&R	EL – CL	IS – V&NC *	SP – PS
MY – COP	EL – SRS	IS – T √	SP – C&I
MY – PGS	EL – PRS	IS – C&SI √	

Table key

*	Signposted to indicate opportunities for development as a part of wider teaching and learning
√	Embedded in teaching, learning and assessment
blank	Not embedded or signposted in unit

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Essential information for assignments

The recommended structure of assessment is shown in the unit summary, along with suitable forms of evidence. The *Pearson BTEC International Level 3 Qualifications Supplementary Information* document gives information on setting assignments. There is also further information on our website.

There is a maximum number of 3 summative assignments for this unit.

The relationship of the learning aims and criteria is:

Learning aim: A (A.P1, A.P2, A.M1, A.M2, A.D1)

Learning aim: B (B.P3, B.P4, B.M3, B.D2)

Learning aim: C (C.P5, C.P6, C.M4, C.D3)

Further information for teachers and assessors

Resource requirements

For this unit, students must have access to current national guidelines and organisational policies specific to their own country.

Essential information for assessment decisions

Learning aim A

For distinction standard, students will use the given case studies to draw together their knowledge and understanding of the values and skills required of professionals to successfully provide person-centred care, and how effective communication will support this to meet the care and support needs of two individuals. They will draw together their understanding of duty of care and the challenges this may sometimes present. Students will articulate arguments and views concisely to justify conclusions about the effectiveness of methods and strategies used by professionals to meet the care and support needs of the two individuals.

For merit standard, students will use the given case studies to consider the appropriateness and success of methods and strategies used by professionals to build positive relationships and trust with two individuals. This will include the skills and values professionals could demonstrate to establish trust, as well as a consideration of the approach to person-centred care and how it is applied to the case studies. Students will also consider how effective communication is important to build positive relationships and trust with the two individuals. They will make reasoned judgements on the selection of communication methods for the two individuals and analyse their importance and potential impact on the individuals.

For pass standard, students will use the given case studies to explain the values, skills and personal attributes required by professionals to meet the care and support needs of two individuals. This will include how professionals ensure person centred care and approaches are utilised for both individuals, and how this information is documented, stored and shared among the team providing care and support for the individuals. Students will demonstrate knowledge and understanding of different strategies and techniques used by professionals to ensure communication is effective, and will relate this to the consideration of the needs of the individuals in the case studies. Students will demonstrate an understanding of what a duty of care is and the expectations on professionals to manage dilemmas in practice appropriately. Students will also demonstrate they understand that working with vulnerable adults and children may require following additional processes and procedures to meet the needs of individuals in the case studies.

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Learning aim B

For distinction standard, students will draw on their knowledge and understanding to make suitable judgements on how effectively health and social care services work together to meet the specific needs of the two individuals in the given case studies. Students will justify the suitability of each health and social care organisation in providing the care and support needed to meet the individual's needs. They will make reasoned judgements about the impact of health and social care services working together, making links to the relevant organisations and guidance that inform and direct their service delivery, on working together to meet the specific needs of the two individuals in their chosen case studies. As part of their evaluation, students must also consider the challenges that may arise through health and social care services working together to meet the needs of the two individuals under the governance and regulation of relevant organisations and guidance, and the degree to which the services navigate these challenges successfully, to reach reasoned and valid conclusions.

For merit standard, students will consider how relevant organisations and guidance impact on the provision of care and support, and this must be related to meeting the needs of the individuals in the case studies. Students must make clear and reasoned judgements on the benefits of health and social care services working together, under integrated care systems, to provide co-ordinated care and support for the two individuals. Students will carefully consider the impact of health and social care services working together on the two individuals and how this can help them overcome any individual challenges they face and meet their individual needs.

For pass standard, students will use the information in the case studies to explain how relevant organisations and guidance inform the provision of care and support in the sector for both individuals. Students will draw on the information provided in the case study to explain the suitability of the health and social care services required to plan and provide care for each of the two individuals, and how services work together under the conditions of guidance. They should show that they understand how support is needed from a range of health and social care services, and how packages of care and support require professionals from different disciplines to meet the care and support needs of both individuals.

Learning aim C

For distinction standard, students will select relevant information from the case studies to make reasoned judgements on how inclusive working practices have impacted on the health outcomes of two individuals. Students will draw together their understanding of the factors that may affect the health outcomes of the two individuals, and the strategies that can be used to overcome the challenges they face. They must consider the advantages and disadvantages of the methods and strategies used by professionals and consider the impact of each on overcoming barriers and improving the health outcomes of the two individuals. Students will use detailed analysis and research to reach reasoned and valid conclusions about the impact of equity, diversity and discrimination, and about how inclusive working practices impact the health outcomes of individuals.

For merit standard, students will draw on the information in the case studies to explore how the inclusive working practices of professionals might impact the health outcomes for two individuals. Students will explore the impact of factors affecting the health status of both individuals and select material from the provided case studies to explore the potential barriers they may face. This may include issues surrounding equity and diversity, as well as the impact of discrimination on each individual. Students must make reasoned, analytical judgements on the impact of working practices to overcome potential barriers and meet the needs of the two individuals.

For pass standard, students will consider the relevant factors affecting the health status of the two individuals, including the social and environmental factors that affect their health outcomes, and will explain the impact of these factors on both individuals, giving relevant examples to support their answer. Students will select material from the provided case studies, which will allow them to demonstrate an understanding of the importance of professionals promoting equity, diversity, and inclusion in practice to improve each individual's health outcomes. Students will consider the importance of promoting equity and diversity in health and social care and must use the case studies to give relevant examples of how professionals should promote equity and diversity, inclusion, and anti-discriminatory practices for the two individuals.

Links to other units

This unit links to:

- Unit 1: Human Lifespan Development
- Unit 2: Anatomy and Physiology for Health and Social Care
- Unit 4: Principles of Safe Practice in Health and Social Care.

Unit 10: Physiological Disorders and their Care

Level: 3

Unit type: Internal

Guided learning hours: 60

Unit in brief

Students explore types of physiological disorders, the procedures for diagnosis, including the use of modern technologies and holistic care approaches, and the development of a treatment plan and provision of support for individuals.

Unit introduction

Health and social care professionals play a vital role in supporting individuals with physiological disorders. Understanding these conditions, their causes and their impact on body systems, is essential for delivering safe, effective and compassionate care. This unit introduces you to the complexity of physiological disorders and the importance of accurate diagnosis and tailored treatment.

In this unit, you will learn about the signs and symptoms of physiological disorders and how they are investigated and diagnosed, from common chronic conditions to emerging health challenges influenced by lifestyle, environment and technology. You will also learn about the different types of treatment and support available for individuals, including surgery, rehabilitation and complementary therapies. You will create a treatment plan for an individual with a specific physiological disorder. This will help you understand the treatment and support strategies involved, the contributions of different professionals, and the importance of providing individualised care. The unit also examines modern approaches to care, including digital health tools, personalised medicine and holistic support strategies that address both physical and mental wellbeing.

This unit will form a good basis for higher education studies in health and social work courses and nursing qualifications. The information and activities will also help to prepare you for a variety of careers within the health and social care sector and enable you to adapt to new technologies, integrated care models, and the growing emphasis on person-centred practice.

Learning aims

In this unit you will:

A Investigate the causes and effects of physiological disorders

B Examine the investigation and diagnosis of physiological disorders

C Examine treatment and support for individuals with physiological disorders

D Develop a treatment plan for individuals with physiological disorders to meet their needs.

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Summary of unit

Learning aim	Key content areas	Assessment approach
A Investigate the causes and effects of physiological disorders	**A1** Types of physiological disorders and effects on body systems and functions **A2** Causes of physiological disorders **A3** Signs and symptoms of physiological disorders	Students will present information on the impact of two different physiological disorders on the health and wellbeing of individuals, and the potential benefits of different investigations and treatment options for individuals diagnosed with physiological disorders.
B Examine the investigation and diagnosis of physiological disorders	**B1** Investigative procedures for physiological disorders **B2** Diagnostic procedures for physiological disorders	
C Examine treatment and support for individuals with physiological disorders	**C1** Provision of treatment and support **C2** Types of carers and care settings	
D Develop a treatment plan for individuals with physiological disorders to meet their needs	**D1** Care methods and strategies **D2** Treatment planning processes	Students will create a treatment plan to meet the needs of a selected individual with a physiological disorder.

Content

The essential content is set out under content areas. Students must cover all specified content before the assessment.

Learning aim A: Investigate the causes and effects of physiological disorders

A1 Types of physiological disorders and effects on body systems and functions

- Endocrine system disorders, e.g. diabetes, hypothyroidism and hyperthyroidism.
- Nervous system disorders, e.g. Parkinson's disease, Alzheimer's disease.
- Musculoskeletal system disorders, e.g. rheumatoid arthritis, osteoporosis.
- Respiratory system disorders, e.g. asthma, chronic obstructive pulmonary disease (COPD).
- Circulatory system disorders, e.g. coronary heart disease, leukaemia.
- Cancer, e.g. bowel, lung.
- Impact of disorders on individuals' physical, mental, social and emotional health.
- Emerging health issues, e.g. long COVID, autoimmune disorders, lifestyle-related conditions linked to technology use (such as sedentary-related metabolic syndrome).

A2 Causes of physiological disorders

- Inherited traits, e.g. sickle cell disease, thalassemia.
- Lifestyle choices, e.g. smoking cigarettes, drug misuse.
- Diet, e.g. obesity, dietary deficiency.
- Environment, e.g. housing conditions, air pollution.

A3 Signs and symptoms of physiological disorders

- Observable signs of physiological disorders, e.g. rash, swelling.
- Symptoms experienced by the individual, e.g. pain, disorientation.

Learning aim B: Examine the investigation and diagnosis of physiological disorders

B1 Investigative procedures for physiological disorders

- General measurements that may be undertaken, e.g. blood pressure, body temperature.
- Investigations as appropriate for each individual, e.g. medical history, blood tests.

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B2 Diagnostic procedures for physiological disorders

- Procedures based on specific signs and symptoms, e.g. lumbar puncture, biopsy, digital health tools – AI-assisted diagnostics, wearable health monitors, telehealth assessments, predictive analytics.
- Importance of recognising non-specific or confusing symptoms, e.g. Alzheimer's disease, which shares symptoms with other dementia types, other neurological disorders such as Parkinson's disease and some presentations of mental ill-health, such as depression and anxiety.

Learning aim C: Examine treatment and support for individuals with physiological disorders

C1 Provision of treatment and support

- Medication, e.g. anti-inflammatory drugs.
- Surgery, e.g. surgical procedures for cancer.
- Rehabilitation programmes, e.g. physiotherapy.
- Complementary therapies, e.g. aromatherapy, acupuncture.
- Advice on lifestyle changes, e.g. dietary guidelines.
- Personalised medicine – genomic-based treatments, pharmacogenomics and digital therapeutics (apps for chronic disease management).

C2 Types of carers and care settings

- Carers:
  - professional carers, e.g. general practice doctors, specialist doctors, nurses
  - informal carers, e.g. friends, family
  - private and voluntary carers, e.g. charitable organisations, private care agencies
  - interdisciplinary teams – integration of digital health specialists, mental health professionals, social prescribers.
- Care settings:
  - individual's own home
  - government, local authority or privately provided residential homes, e.g. for care of the elderly or those with long-term conditions
  - doctor's office or health centre
  - hospital care
  - rehabilitation settings
  - virtual care environments – telemedicine platforms, remote monitoring, hybrid care models.

Learning aim D: Develop a treatment plan for individuals with physiological disorders to meet their needs

D1 Care methods and strategies

- Assessment of care needs, e.g. primary, secondary, tertiary care, allied health care.
- Reviewing care needs, e.g. making changes as required.
- Validity and reliability of the sources of information on possible treatments.

D2 Treatment planning processes

- Cycle of planning.
- Individual needs, including culture, gender, age, religion, disability.
- Purpose and aim of care for individual.
- Health equity and inclusion – address social determinants of health, cultural competence, accessibility in digital care.
- Outcomes to be achieved.
- Actions to be taken.
- Overcoming potential barriers.
- Professional responsibilities.
- Advantages and disadvantages of different types of treatment, e.g. benefits to individuals, costs to health and social care services.
- Scheduling, including times and locations where treatment will take place.
- Timescales for achievement.
- Modern pedagogy – virtual simulations, VR/AR for anatomy and care planning, team-based learning, AI-driven scenario analysis.
- Sustainability in healthcare – green care practices, reducing carbon footprint in care delivery.

Assessment criteria

Learning aim A: Investigate the causes and effects of physiological disorders

Learning aim B: Examine the investigation and diagnosis of physiological disorders

Learning aim C: Examine treatment and support for individuals with physiological disorders

Pass	Merit	Distinction
A.P1 Explain the causes, signs and symptoms of different types of physiological disorder on individuals.	**A.M1** Analyse the changes in body systems and functions resulting from different types of physiological disorder on individuals.	**A.D1** Evaluate the impact of physiological disorders on the health and wellbeing of individuals.
B.P2 Compare investigative and diagnostic procedures for different physiological disorders.	**B.M2** Assess the importance of specific procedures in confirming the diagnosis of physiological disorders.	**BC.D2** Justify the potential benefits of different investigations and treatment options for individuals diagnosed with physiological disorders.
C.P3 Explain the treatment and support available for individuals with different physiological disorders. **C.P4** Compare the types of carers and care settings for individuals with different physiological disorders.	**C.M3** Assess the provision of treatment, support and types of care for individuals with different physiological disorders.	

Learning aim D: Develop a treatment plan for individuals with physiological disorders to meet their needs

Pass	Merit	Distinction
D.P5 Assess care needs of a selected individual with a physiological disorder. **D.P6** Plan treatment to meet the needs of a selected individual with a physiological disorder. **D.P7** Explain how the plan would improve the health and wellbeing of a selected individual.	**D.M4** Plan treatment to meet the needs of a selected individual with a physiological disorder, reviewing as appropriate to improve outcomes. [SP – PS]	**D.D3** Justify the recommendations in the plan in relation to the needs of the individual and advantages and disadvantages of treatment options.

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Transferable skills

Managing Yourself	Effective Learning	Interpersonal Skills	Solving Problems
MY – TPR	EL – MOL	IS – WC	SP – CT
MY – PS&R	EL – CL	IS – V&NC	SP – PS √
MY – COP	EL – SRS	IS – T	SP – C&I
MY – PGS	EL – PRS	IS – C&SI	

Table key

*	Signposted to indicate opportunities for development as a part of wider teaching and learning
√	Embedded in teaching, learning and assessment
blank	Not embedded or signposted in unit

Essential information for assignments

The recommended structure of assessment is shown in the unit summary, along with suitable forms of evidence. The *Pearson BTEC International Level 3 Qualifications Supplementary Information* document gives information on setting assignments. There is also further information on our website.

There is a maximum number of two summative assignments for this unit.

The relationship of the learning aims and criteria is:

Learning aims: A, B and C (A.P1, B.P2, C.P3, C.P4, A.M1, B.M2, C.M3, A.D1, BC.D2)

Learning aim: D (D.P5, D.P6, D.P7, D.M4, D.D3)

Further information for teachers and assessors

Resource requirements

For this unit, students can be given a care plan template for assignment 2, or they can design their own.

Essential information for assessment decisions

Learning aims A, B and C

For distinction standard, students will articulate their arguments and views concisely and professionally to justify conclusions on different types of physiological disorder and their effects on body systems and functions. They must show an in-depth understanding that applies to less familiar situations, including the causes, signs and symptoms of two different physiological disorders. Students must draw on knowledge and understanding of investigative and diagnostic procedures for two different physiological disorders, making suitable justifications. They must use detailed analysis and research of local health and social care settings to make proposals for the provision of treatment and support, and types of carers and care settings available for two individuals with different physiological disorders.

For merit standard, students will make reasoned, analytical judgements involving comparisons, discussions or justifications of different types of physiological disorder and their effects on body systems and functions. They must show that they understand how knowledge is applied to detailed situations of causes, signs and symptoms of two different physiological disorders. Students must interrelate investigative and diagnostic procedures for two different physiological disorders and draw suitable conclusions. They must use research of local health and social care settings to extend understanding to detailed contexts of provision of treatment and support, and types of carers and care settings available for two individuals with different physiological disorders.

For pass standard, students will demonstrate an understanding of different types of physiological disorder and the effects on body systems and functions. They must explore familiar applications of knowledge to show an understanding of the causes, signs and symptoms of two different physiological disorders. Students must select and organise information using appropriate knowledge and concepts on investigative and diagnostic procedures for two different physiological disorders, making suitable judgements. They must use research relevant to given situations, including data sources on local health and social care settings and provision of treatment and support, and types of carers and care settings available for two individuals with different physiological disorders.

Learning aim D

General note

The selected individual may be chosen by students or teachers. Alternatively, students may develop the plan with family members, relatives, neighbours or friends. However, students must respect confidentiality at all times and obtain formal consent from individuals in order to report any information. The physiological disorder that students choose must be agreed with the teacher.

For distinction standard, students will make the most appropriate selections in given constraints and desired outcomes when assessing an individual's care needs. They must use their knowledge, skills and understanding gained from across their learning to match solutions to potential barriers, or to innovate and show lateral thinking when planning treatment for an individual, including the factors to be considered to meet the individual's need. Students must make valid judgements about limitations of methods in relation to desired outcomes.

For merit standard, students will relate and differentiate the use of different skills when assessing an individual's care needs. They must modify processes and skills to suit contexts and address contingencies when planning treatment for an individual, including the factors to be considered to meet the individual's need. Students must modify techniques and processes to suit contexts and address contingencies.

For pass standard, students will achieve planned outcomes by carrying out activities fully, correctly and safely when assessing an individual's care needs. Students must select and deploy appropriate processes and skills in familiar situations when planning treatment for an individual, including the factors to consider to meet the individual's need. Students must review the success of processes and skills used in the treatment plan.

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Links to other units

This unit links to:

- Unit 3: Promoting Public Health
- Unit 4: Principles of Safe Practice in Health and Social Care
- Unit 7: Infection Prevention and Control
- Unit 9: Principles of Effective Care
- Unit 16: Nutritional Health
- Unit 19: Biomedical Science
- Unit 21: Complementary Therapies for Health and Social Care.

Unit 11: Supporting Individuals with Additional Needs

Level: 3

Unit type: Internal

Guided learning hours: 60

Unit in brief

Students explore the reasons individuals may have additional needs and the challenges they face in daily life, as well as the strategies and services that support them. This unit also examines current practices and how a person-centred approach promotes inclusion and wellbeing.

Unit introduction

While working in health and social care, you may care for a full range of individuals with additional needs. Individuals with these additional needs have a right to receive the best quality care and support. This unit aims to give you specialist knowledge that can be crucial to ensuring that those with additional needs meet their full potential.As a practitioner in a health or social care environment, you will be responsible for ensuring that everyone in your care has the same opportunities. Additional needs are essentially about each person's uniqueness and wellbeing rather than about discrimination, and it will be your job to ensure that you treat individuals equally, respect diversity, and foster an environment with high expectations.

In this unit, you will explore the range of additional needs individuals face, considering the effects these needs have on their wellbeing, rights and access. Individuals with additional needs may need provision from a number of services, meaning that organisations work in partnership to assess needs and provide support. You will investigate the support provided to explain how it is possible to overcome the challenges that these needs pose to daily living. Finally, you will investigate the working practices that govern work in the health and social care sector, and support the rights of individuals with additional needs.

This unit will help you progress into a range of careers working with children and adults with additional needs, as well as into higher education to study nursing, social work and therapy.

Learning aims

In this unit you will:

A Examine reasons why individuals may experience additional needs

B Examine how to overcome the challenges to daily living faced by individuals with additional needs

C Investigate current practice with respect to provision for individuals with additional needs.

Summary of unit

Learning aim	Key content areas	Assessment approach
A Examine reasons why individuals may experience additional needs	**A1** Diagnosing or determining additional needs **A2** Cognitive and learning needs **A3** Physical and health needs **A4** Social and emotional needs	Students will present information on how additional needs are determined and diagnosed, with examples of the additional needs that individuals can experience.
B Examine how to overcome the challenges to daily living faced by individuals with additional needs	**B1** Definitions of disability **B2** Minimising environmental and social challenges **B3** Minimising personal challenges **B4** Attitudes of others	Students will present information on current practices and procedures for providing care for children and adults with additional needs, including the support given to overcome challenges in daily living.
C Investigate current practice with respect to provision for individuals with additional needs	**C1** Provision of services available for individuals with additional needs **C2** Support and adaptations for individuals with additional needs **C3** Professionals involved in supporting individuals with additional needs **C4** Person-centred care for all individuals with special needs **C5** Current working practices to support individuals with special needs	

Content

The essential content is set out under content areas. Students must cover all specified content before the assessment.

Learning aim A: Examine reasons why individuals may experience additional needs

A1 Diagnosing or determining additional needs

- Definitions of mild, moderate, severe and profound additional needs.
- Diagnostic procedures, tools and standards used to diagnose a disability, digital diagnostic tools, genetic screening ethics, early intervention supported by AI.
- Professional background, qualifications and experience of those undertaking the diagnosis and assessment.
- Parameters used to describe the diagnosed condition. This must include the type, causation, severity and stability over time, and prognosis of the condition.

A2 Cognitive and learning needs

- Learning difficulties, to include dyslexia, dyspraxia, attention deficit hyperactivity disorder (ADHD).
- Autism-spectrum disorders, to include pervasive developmental disorder not otherwise specified (PDD-NOS), childhood disintegrative disorder.
- Neurodiversity-affirming practices, mental health awareness.
- Inherited conditions, to include Huntington's disease.
- Other common cognitive conditions, to include Down's syndrome, dementia, Alzheimer's disease.
- Needs of older individuals, to include memory loss, slower cognitive speed, life-long learning.

A3 Physical and health needs

- Needs of older individuals, to include arthritis, diabetes and cardiovascular disease.
- Health needs, to include physical needs, cystic fibrosis, sickle cell disorders, stroke, mental illnesses.
- Sensory disabilities, to include deafness and hearing impairment, visual impairment.
- Accidents, to include paraplegia, loss of limb.
- Infectious diseases that can lead to individuals having additional needs.
- Problems during pregnancy and birth that can lead to individuals having additional needs.

A4 Social and emotional needs

- Needs generated from family circumstances, to include specific needs of looked-after children, bereavement, school refusers, bullying.

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- Needs generated by being elderly, to include loss of loved ones, fear of dying, family far away, isolation, lack of money.
- Needs affected by the learning environment.

Learning aim B: Examine how to overcome the challenges to daily living faced by individuals with additional needs [IS – C&SI]

B1 Definitions of disability

- Models of disability, to include medical and social models.
- Universal design principles, assistive technology (smart devices, VR therapy), telehealth, digital inclusion.
- Understanding of disability and dependency as social constructs.
- Definitions of disability, disablement, discrimination and impairment.

B2 Minimising environmental and social challenges

How society's infrastructure should support equality for individuals with additional needs, to include:

- access and barriers, e.g. public buildings, public transport
- minimising barriers, e.g. ramps, large-print information, trauma-informed care, intersectionality approaches to addressing barriers
- employment, e.g. adaptations to work environment, communication aids
- inclusion, e.g. leisure activities, internet and social networking
- daily living, e.g. shopping, home and personal care services, mobility aids.

B3 Minimising personal challenges

How health and social care workers can support personal challenges and help to minimise some of the daily challenges to daily living for individuals with additional needs, to include:

- physical, e.g. dressing, washing, feeding, indoor/outdoor activities
- intellectual, e.g. education, media, internet
- emotional, e.g. isolation, depression, dependency
- social, e.g. friendships, personal relationships.

B4 Attitudes of others

How important it is that health and social care workers are aware of the attitudes of others, how these attitudes can be detrimental to health, wellbeing and inclusion, to include:

- stereotyping and judgemental assumptions
- marginalisation, such as failure, to include avoidance
- discrimination, including failure to make adjustments or modifications
- disempowerment, including not allowing individuals to make decisions, removing choice
- labelling.

Learning aim C: Investigate current practice with respect to provision for individuals with additional needs

C1 Provision of services available for individuals with additional needs

- Day care centres, residential homes, hospitals, independent living, community provision, early years, education, training.
- Statutory, voluntary, private.
- Integrated digital health systems, AI-driven care planning, remote monitoring, data privacy ethics.
- Sustainability in care environments and green health practices.
- Short-term, long-term provision.

C2 Support and adaptations for individuals with additional needs

- Equipment and adaptations, such as mobility aids, daily living adaptations (including those for individuals with paraplegia) and communication aids (e.g. hearing aids).
- Therapies, to include occupational therapy, art therapy, music therapy, speech therapy, physiotherapy.
- Short- and long-term support.

C3 Professionals involved in supporting individuals with additional needs

- The basic job roles and responsibilities of caring for individuals with additional needs, to include community learning disability nurses, occupational therapists, physiotherapists, psychiatrists, psychologists, social workers, speech and language therapists, special needs teachers.

C4 Person-centred care for all individuals with special needs

- Involving patients in their own care and showing them compassion, dignity and respect.
- Involving patients as equal partners in decision making about their care, including self-management support, access to personal health records, care planning and shared treatment decisions.

C5 Current working practices to support individuals with special needs

- Promoting independence.
- Maintaining privacy.
- Promoting choice and dignity.
- Promoting individual rights.
- Promoting anti-discriminatory practice.

Assessment criteria

Learning aim A: Examine reasons why individuals may experience additional needs

Pass	Merit	Distinction
A.P1 Explain diagnostic procedures to determine additional needs for one child and one adult with different additional needs.	**A.M1** Assess the requirements of one child and one adult with different additional needs.	**A.D1** Evaluate the significance to the individuals, their families and society of a diagnosis of additional needs.

Learning aim B: Examine how to overcome the challenges to daily living faced by individuals with additional needs

Learning aim C: Investigate current practice with respect to provision for individuals with additional needs

Pass	Merit	Distinction
B.P2 Explain how disability can be viewed as a social construct. **B.P3** Describe how health or social care workers can help one child and one adult with different additional needs overcome challenges to daily living.	**B.M2** Assess the impact of challenges to daily living that may be experienced by one child and one adult with different additional needs, and how effectively these challenges are overcome.	**BC.D2** Justify the support and adaptations provided for two individuals with different additional needs to help them overcome challenges to daily living. **BC.D3** Evaluate the impact of providing support for two individuals diagnosed with different additional needs in improving their wellbeing and life chances.
C.P4 Explain the benefits of adaptations and support provided to one child and one adult with different additional needs. **C.P5** Explain the roles and responsibilities of professionals who work with one child and one adult with different additional needs.	**C.M3** Analyse how the support provided for one child and one adult with different additional needs has benefited them. **C.M4** Assess the impact of person-centred care and positive working practices on individuals with additional needs.	

Transferable skills

Managing Yourself	Effective Learning	Interpersonal Skills	Solving Problems
MY – TPR	EL – MOL	IS – WC	SP – CT
MY – PS&R	EL – CL	IS – V&NC	SP – PS
MY – COP	EL – SRS	IS – T	SP – C&I
MY – PGS	EL – PRS	IS – C&SI *	

Table key

*	Signposted to indicate opportunities for development as a part of wider teaching and learning
√	Embedded in teaching, learning and assessment
blank	Not embedded or signposted in unit

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Essential information for assignments

The recommended structure of assessment is shown in the unit summary, along with suitable forms of evidence. The *Pearson BTEC International Level 3 Qualifications Supplementary Information* document gives information on setting assignments. There is also further information on our website.

There is a maximum number of two summative assignments for this unit.

The relationship of the learning aims and criteria is:

Learning aim: A (A.P1, A.M1, A.D1)

Learning aims: B and C (B.P2, B.P3, C.P4, C.P5, B.M2, C.M3, C.M4, BC.D2, BC.D3)

Further information for teachers and assessors

Resource requirements

Ideally, students will need access to real health or social care settings to observe practice and base their assignments on two individuals – one child and one adult. The assignments must be anonymised, and the confidentiality of the individuals must be maintained. Alternatively, students must be provided with a selection of realistic case studies from which they can choose and use to base their assignments.

Essential information for assessment decisions

Learning aim A

For distinction standard, students will articulate arguments and views concisely to make judgements about how the diagnosis of additional needs impacts each of the individuals. Students must evaluate the possible long-term effects on the individual, the family and society to reach reasoned, valid judgements. They must use detailed analysis and research from recognised sources and consider the emotional, physical, social, intellectual and financial impacts on the individual, the family and society to reach valid and justified conclusions.

For merit standard, students will select and apply relevant knowledge using vocational language to assess the requirements of each individual. Students must demonstrate they understand reflections about expected developmental progress and how far the individuals in their case studies differ from this. Students' evidence must show they have used research from a recognised source to extend their understanding to less-familiar contexts.

For pass standard, students will show their knowledge of diagnostic procedures by using relevant research to explain the tools and standards used to diagnose the additional needs. Students must also include the professional background, qualifications and experience of those who provide the diagnosis and assessment. When discussing the condition leading to a diagnosis of additional need, students must also include the causes of the condition (if known), its severity, how it changes over time, and its prognosis. They must select and organise information leading to suitable judgements. Students must demonstrate their understanding by explaining in some detail the additional needs each individual is experiencing. They must explore well-defined situations to explain whether the additional need is mild, moderate, severe or profound, and to describe the type of additional needs faced by the individuals in their case studies.

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Learning aims B and C

For distinction standard, students will use their research to justify the appropriateness of the support and adaptations provided to help the individuals overcome their challenges.

Students will draw together their knowledge and understanding across the learning aims to evaluate the advantages or otherwise of the support provided to the two individuals. Evidence could be from research or from interviews with relevant professionals. Students must reach justified conclusions about how effective the support was for improving the individuals' wellbeing. They must consider that the impact may improve wellbeing in one or more areas of the individuals' development.

Students must use research to reach justified conclusions on the possible long- and short-term effects of early intervention to address challenges to daily living on the wellbeing and life chances of the individual. Students must refer to relevant research to justify the validity of their recommendations and proposals.

For merit standard, students will carefully consider the impact of the challenges to daily living on the individuals and their families. Students will use their research to extend their understanding into more complex contexts, for example a non-verbal individual dealing with communication challenges, that may lead to additional social and attitudinal challenges.

Students will carefully consider each individual and conclude how they benefit from the support provided. Students must compare and justify the types of provision given to reach reasoned, analytical judgements. Knowledge could be applied to more complex situations, for example where several types of support may be provided to overcome challenges to daily living.

Students will use research from relevant sources to extend their understanding of person-centred care and positive working practices and apply this to working with individuals who have additional needs, for example balancing the individual's right to independence with ensuring their safety is not compromised. Students will reach reasoned judgements by comparing the benefits of positive working practices and of delivering person-centred care with care that reflects neither, drawing conclusions about the importance of person-centred care. They must use appropriate vocational language and subject-specific terminology.

For pass standard, students will define relevant terms such as disability, discrimination and impairment, and show evidence of research into disability as a social construct. Students must relate their research to the type of additional needs that their two chosen individuals have. They must select and organise their information to reach valid conclusions.

Students will describe the support and adaptations provided for each of the individuals to overcome the challenges they experience. Students must include a detailed description of the professionals who support the individuals, as well as equipment and therapies used, to demonstrate they understand a range of techniques and can relate them to the context.

Students will show evidence that they have researched the benefits of the support and adaptations described. They will show some consideration of how the provision is person-centred and unique to the individuals' needs. They must apply their knowledge to well-defined situations to review the success of the techniques and processes used, for example someone with mobility issues may benefit from the provision of daily living adaptations in the home.

Students will explain the roles and responsibilities of a minimum of two different professionals who support each of the individuals they have chosen, giving examples to support their explanations. They will explain how professionals use person-centred care, which is unique to the individuals' needs. They will show evidence of research, using a range of sources.

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Links to other units

This unit links to:

- Unit 1: Human Lifespan Development
- Unit 2: Anatomy and Physiology for Health and Social Care
- Unit 4: Principles of Safe Practice in Health and Social Care.

This unit may be taught alongside:

- Unit 5: Enquiries into Current Research in Health and Social Care
- Unit 6: Psychological Perspectives
- Unit 8: Sociological Perspectives
- Unit 9: Principles of Effective Care
- Unit 13: Policy in Health and Social Care
- Unit 14: Caring for Individuals with Dementia
- Unit 17: Understanding Mental Wellbeing.

Unit 12: Microbiology for Health Science

Level: 3

Unit type: Internal

Guided learning hours: 60

Unit in brief

Students will explore microbiology concepts and the role of microorganisms in health and disease. They will examine the factors that influence the development of infectious diseases, and the global impact of infectious diseases and their treatment strategies.

Unit introduction

The prevention and treatment of disease is central to health and social care practice. Understanding how microorganisms cause infection, and how these infections can be controlled, is essential for professionals working in clinical, community and public health settings. This unit provides the foundation for exploring microbiology and its application in health science.

In this unit, you will investigate the structure and growth requirements of microorganisms and the body's defence mechanisms. You will learn about the factors that influence disease development, such as diet and environmental conditions. You will also examine how infections spread and the different ways to prevent and manage them. This will include vaccination and hygiene management approaches.

By completing this unit, you will develop scientific knowledge and analytical skills that support progression to higher education and careers in health care, biomedical science and public health, such as laboratory technician, infection control assistant and public health support roles. You will develop secondary research skills that will be applicable to many careers in health. You will also learn about laboratory techniques that are used in many health settings.

Learning aims

In this unit you will:

A Understand key microbiology concepts relevant to health science

B Examine the impact of microorganisms on human health and disease

C Investigate the impact of infectious diseases and their control in a global context.

Summary of unit

Learning aim	Key content areas	Assessment approach
A Understand key microbiology concepts relevant to health science	**A1** Structure and reproduction of microorganisms **A2** Types of pathogenic microorganisms **A3** Control methods for microorganisms	Students will present information on the methods that can be used to control the growth and spread of microorganisms.
B Examine the impact of microorganisms on human health and disease	**B1** Transmission routes **B2** The body's defences against infection **B3** The factors that influence the development of infectious diseases	Students will present information on the impact of microorganisms on human health and disease and factors influencing diseases and infections.
C Investigate the impact of infectious diseases and their control in a global context	**C1** Epidemiology **C2** Management and control of outbreaks of infectious diseases **C3** Consequences of outbreaks	Students will present information on the reasons for the spread of infectious diseases and how to control and treat them.

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Content

The essential content is set out under content areas. Students must cover all specified content before the assessment.

Learning aim A: Understand key microbiology concepts relevant to health science

A1 Structure and reproduction of microorganisms

- Viruses: retroviruses, bacteriophages, replication inside host cells.
- Bacteria: prokaryotic structure; cocci, bacilli, spirilla; replication by binary fission.
- Fungi: eukaryotic, yeasts and moulds, reproduction by spore formation.
- Protozoa: plasmodium, trypanosome, life cycles including sexual and asexual reproduction.

A2 Types of pathogenic microorganisms

- Viral: influenza, HIV, COVID-19.
- Bacterial: tuberculosis, salmonella, meningitis.
- Fungal: candidiasis, tinea infections.
- Protozoan: malaria.

A3 Control methods for microorganisms

- Physical: autoclaving, refrigeration, freezing, radiation.
- Chemical: disinfectants, antiseptics, antibiotics.

Learning aim B: Examine the impact of microorganisms on human health and disease

B1 Transmission routes

- Direct: person-to-person, animal-to-person, mother-to-child, blood transfusion.
- Indirect: contaminated surfaces and fomites, airborne droplets, vectors, contaminated food, contaminated water.
- Transmission prevention measures: protective clothing, isolation, barrier nursing.
- Vector control: mosquitoes, tsetse flies.

B2 The body's defences against infection

- The body's defences: non-specific defences, skin, mucous membranes, tears; the immune response, white blood cells, antibodies, antigens.
- Vaccination: to include live attenuated and inactivated vaccines.

B3 The factors that influence the development of infectious diseases

- Biological factors that affect the susceptibility of an individual to infection: malnutrition and nutrient deficiency, chronic disease and blood disorders (sickle cell disease, type 2 diabetes, cardiovascular disease).
- Environmental factors that affect the prevalence of infectious disease: pollution, sanitation and water treatment, overcrowded living conditions.

Learning aim C: Investigate the impact of infectious diseases and their control in a global context [EL – PRS]

C1 Epidemiology

- Disease outbreak classification: endemic (e.g. chicken pox), epidemic (e.g. influenza), pandemic.
- How disease outbreaks change in classification (e.g. malaria).

C2 Management and control of outbreaks of infectious diseases

- The role of: World Health Organization (WHO), national and local governments, non-governmental organisations (NGOs).
- The role of health personnel (e.g. epidemiologists).
- Public health strategies, including vaccination strategies, herd immunity, vector control, trade regulations.
- Factors: cost, availability of health personnel, drugs, community agreement.

C3 Consequences of outbreaks

- Social and economic impact on individuals, families, communities.
- Ethical considerations: unlicensed drugs, exposing health workers.
- Risks of antibiotic resistance and the effect of cultural barriers on treatments and strategies.

Assessment criteria

Learning aim A: Understand key microbiology concepts relevant to health science

Pass	Merit	Distinction
A.P1 Describe the structure and reproduction of four microorganisms. **A.P2** Describe the types of pathogenic microorganisms, and the control methods used to prevent the growth and transmission of the four types of microorganisms.	**A.M1** Analyse how different control methods prevent the growth and transmission of the four types of microorganisms.	**A.D1** Justify the effectiveness of two different control methods for microorganisms.

Learning aim B: Examine the impact of microorganisms on human health and disease

Pass	Merit	Distinction
B.P3 Describe the body's defences and how vaccination can prevent the spread of infectious diseases. **B.P4** Describe the transmission routes for four different pathogenic microorganisms. **B.P5** Describe factors that influence the development of infectious diseases.	**B.M2** Compare the transmission routes of pathogenic microorganisms and relate them to specific infections. **B.M3** Assess the impact of factors that influence the development of infectious diseases.	**B.D2** Evaluate the effectiveness of non-specific defences and the immune system against specific infections, and how different factors may affect the effectiveness of the defences, the progression of the infections, and the effect on individuals.

Learning aim C: Investigate the impact of infectious diseases and their control in a global context

Pass	Merit	Distinction
C.P6 Explain how outbreaks of infectious diseases are classified, and the classification for an outbreak may change, with an example of at least one infectious disease for each. **C.P7** Describe the management and control of outbreaks of infectious diseases by different organisations, governments and health professionals.	**C.M4** Assess the effectiveness of authorities in controlling outbreaks of infectious diseases, and the management of the consequences of the outbreaks.	**C.D3** Evaluate the reasons for and the management and consequences of global disease outbreaks.

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Transferable skills

Managing Yourself	Effective Learning	Interpersonal Skills	Solving Problems
MY – TPR	EL – MOL	IS – WC	SP – CT
MY – PS&R	EL – CL	IS – V&NC	SP – PS
MY – COP	EL – SRS	IS – T	SP – C&I
MY – PGS	EL – PRS *	IS – C&SI	

Table key

*	Signposted to indicate opportunities for development as a part of wider teaching and learning
√	Embedded in teaching, learning and assessment
blank	Not embedded or signposted in unit

Essential information for assignments

The recommended structure of assessment is shown in the unit summary, along with suitable forms of evidence. The *Pearson BTEC International Level 3 Qualifications Supplementary Information* document gives information on setting assignments. There is also further information on our website.

There is a maximum number of three summative assignments for this unit.

The relationship of the learning aims and criteria is:

Learning aim: A (A.P1, A.P2, A.M1, A.D1)

Learning aim: B (B.P3, B.P4, B.P5, B.M2, B.M3, B.D2)

Learning aim: C (C.P6, C.P7, C.M4, C.D3)

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Further information for teachers and assessors

Resource requirements

There are no special resources needed for this unit.

Essential information for assessment decisions

Learning aim A

Students will base their work on one microorganism from each of the four different categories given in A1.

For distinction standard, students will show that they have drawn on a number of information sources relating to the methods used in microbe control for different microorganisms. Students must use the information sources to come to a supported judgement about the methods of control and give reasons why some are used and not others. They must articulate their arguments concisely to reach justified conclusions.

For merit standard, students will discuss the transmission of microbes and methods of controlling these. Students must show they have done detailed and methodical research, showing an understanding of the process that demonstrates the interrelationships in their response. They will examine the information to show the interrelationship between transmission and how the requirements for growth can be controlled.

For pass standard, students will refer to named examples of four microorganisms, and their description should cover the structures and reproductive methods of the microbes and their requirements for growth. This will demonstrate that they understand how each organism may have different needs if they are to thrive. These could include oxygen or lack of it, temperature, host substrate, nutrients, pH or water. Students must show how these conditions can be controlled.

Learning aim B

For distinction standard, students will link together the body's defences (non-specific) and immune system (specific and inflammatory) to evaluate their effectiveness. They must include relevant examples to show that defence mechanisms often interact when fighting infections. Students will need to consider the advantages and disadvantages of these defences in relation to their effectiveness and come to a judgement supported by evidence. Students should relate their evaluation to three infections, including spread by direct contact and spread by indirect contact. Students will analyse how diseases progress over time and the effect this may have on affected individuals. They will evaluate how biological and environmental factors affect the development of infection in an individual.

For merit standard, students will show they have drawn on a number of information sources relating to the transmission of different microorganisms. Students will consider direct contact, body fluids, airborne, foodborne, waterborne, vector-borne and transplacental transmission. Students will consider the similarities and differences between the transmission routes of at least two microorganisms involved in human disease and relate these to specific infections. Students will assess how biological and environmental factors influence the effectiveness of defences and the progression of the infection in an individual.

For pass standard, students will describe how the non-specific defences of the body and the immune system are involved in protecting the human body from harmful microorganisms. This must be linked to examples of specific infections to meet the criterion. A description without relevant examples will not meet the criterion. Students will describe how biological and environmental factors influence the effectiveness of defences and the progression of the infection in an individual.

Learning aim C

For distinction standard, students will evaluate the reasons for and consequences of outbreaks of diseases becoming more global. They will need to include the effects on individuals and groups, and control of the outbreaks, as well as the ethical dilemmas these can involve. Students will show they have drawn on a number of information sources relating to the reasons for and consequences of the spread of diseases. Students will need to come to a judgement supported by their evidence, and any arguments put forward must be backed up by facts. Students must draw on their knowledge gained across the unit to reach supported judgements.

For merit standard, students will be able to assess the effectiveness of the various authorities in controlling the outbreak of diseases globally, and how the impact of those diseases on society is managed by authorities. They must give careful consideration to all the factors, identifying which are the most important. They must articulate their arguments concisely and professionally to reach justified conclusions.

For pass standard, students will explain the characteristics of the different classifications of disease outbreaks, giving examples of the diseases associated with each classification. Students also need to provide an account of the role authorities have in controlling the outbreak of diseases.

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Links to other units

This unit links to:

- Unit 2: Anatomy and Physiology for Health and Social Care
- Unit 3: Promoting Public Health
- Unit 4: Principles of Safe Practice in Health and Social Care.

This unit may be taught alongside:

- Unit 5: Enquiries into Current Research in Health and Social Care
- Unit 7: Infection Prevention and Control
- Unit 10: Physiological Disorders and their Care
- Unit 19: Biomedical Science
- Unit 20: Biochemistry for Health.

Unit 13: Policy in Health and Social Care

Level: 3

Unit type: Internal

Guided learning hours: 60

Unit in brief

Students explore how health and social care policies are developed and implemented, and the impact these policies have on organisations and individuals. This unit builds understanding of policy-making processes in health and social care.

Unit introduction

Health and social care services operate within a framework of policies and regulations designed to protect individuals and ensure high standards of care. Understanding how these policies are created and implemented is essential for anyone working in the sector, as they influence everything from service delivery to professional conduct.

This unit explores the role of government agencies in shaping health and social care policy, the factors that influence decision making, and the impact these policies have on organisations and individuals. You will investigate current regulations and codes of practice, and how local settings adapt to meet evolving priorities, including responses to global challenges such as pandemics and digital transformation.

By completing this unit, you will develop critical research and analytical skills that will prepare you for a wide range of roles in health and social care. The knowledge gained will support progression to higher education in health-related fields or employment in roles such as care assistant, policy advisor or community health worker, where understanding policy is key to effective practice, as well as a range of ancillary roles.

Learning aims

In this unit you will:

A Understand the role of government agencies in health and social care policy making

B Examine the factors that may influence policy making in health and social care

C Explore the impact of policy on local health and social care organisations and individuals.

Summary of unit

Learning aim	Key content areas	Assessment approach
A Understand the role of government agencies in health and social care policy making	**A1** The background to the policy-making process **A2** The policy-making process in the health and social care sector	Students will present information on how practice of a local health and social care setting is affected by government agency policy and other factors in meeting objectives, and represents the needs of individuals with a specific need.
B Examine the factors that may influence policy making in health and social care	**B1** Factors that influence policy making in health and social care **B2** Priorities of organisations in the health and social care sector	
C Explore the impact of policy on local health and social care organisations and individuals	**C1** Current regulations in health and social care **C2** Ways that local health and social care organisations implement regulations and policies **C3** Ways that policy affects individuals working in the health and social care sector through codes of practice **C4** Ways that policy affects individuals using health and social care	Students will present information on ways that regulations and codes of practice affect workers and individuals in different local health care or social care settings.

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Content

The essential content is set out under content areas. Students must cover all specified content before the assessment.

Learning aim A: Understand the role of government agencies in health and social care policy making

A1 The background to the policy-making process

- The range of government agencies: digital health governance bodies, international health organisations (WHO, OECD) influencing policy, WHO guidance on Ethics and Governance of Artificial Intelligence for Health.
- Funding issues: digital transformation, telehealth infrastructure, green health care initiatives.

A2 The policy-making process in the health and social care sector

- Definition of government policy.
- The thinking behind the regulations influenced by pressure groups.
- The reasons for reform of health and social care policies.
- How key priorities are identified.
- How research is carried out before policy making begins.
- How data from research is used in formulating policy, real-time health surveillance systems in policy formulation, machine learning for health trends, open data platforms for transparency.
- How recommendations are made.
- How regulations come into practice: how different health and social care settings put regulations into practice.

Learning aim B: Examine the factors that may influence policy making in health and social care

B1 Factors that influence policy making in health and social care

- The views of political parties.
- The ways policy influences codes of practice.
- Research.
- Developing research skills for health and social care investigations, including selecting secondary sources, planning and managing research.
- Promotional campaigns: online health awareness campaigns, influencer-driven health messaging, data-driven public engagement.
- Lobbying.

- The role of individuals using health and social care.
- Individual influences on policy making: patient-led digital platforms, crowdsourced health data, community-driven policy feedback loops.
- Social media influence, public opinion via digital platforms, global health crises (e.g. pandemics, climate change) as major influencing factors.

B2 Priorities of organisations in the health and social care sector

- Implementing policy.
- Meeting objectives set out by government policies.
- Digital inclusion for vulnerable groups, cybersecurity in health systems, sustainability goals (green health care) as organisational priorities.
- Raising awareness of health and social care in the public arena.
- Representing needs of individuals.
- Changes to policy necessitated by COVID-19.
- Reflecting demographic trends and changes.
- Meeting service needs not provided by the government.

Learning aim C: Explore the impact of policy on local health and social care organisations and individuals

C1 Current regulations in health and social care

- Regulations must be current and applicable to the country where the setting is located.
- Data protection guidance, telemedicine compliance standards, AI regulation in health care (e.g. artificial intelligence strategy and implementation plans).
- Link between regulations and policy, and how policy generates regulations.

C2 Ways that local health and social care organisations implement regulations and policies

- Regulations and policies must be current and applicable to local organisations in the country where the setting is located, e.g.:
  - hospitals
  - Clinical Commissioning Groups
  - voluntary sector (e.g. charity organisations)
  - virtual care platforms
  - remote monitoring services
  - integration and implementation of wearable health tech.

C3 Ways that policy affects individuals working in the health and social care sector through codes of practice

- Codes of practice for:
  - health professionals (e.g. doctors, nurses, midwives)
  - care workers in residential homes
  - social workers who support vulnerable individuals.
- Ways policy affects individuals, e.g.:
  - handwashing
  - providing treatment
  - using equipment
  - digital literacy requirements
  - ethical use of AI tools, such as using AI to provide comprehensive evidence-based clinical decision support to health professionals
  - telehealth consultation protocols
  - involving third parties for specific situations.

C4 Ways that policy affects individuals using health and social care

- Entitlement to services.
- Ability to gain access to services and barriers to access.
- Access to digital health services.
- Equity in telehealth.
- Data privacy concerns.
- Impact of climate-related health policies.
- Ability to have their needs met.
- Ability to respond to the ways that services are provided for them (e.g. complaints, refuse treatment).

Assessment criteria

Learning aim A: Understand the role of government agencies in health and social care policy making

Learning aim B: Examine the factors that may influence policy making in health and social care

Pass	Merit	Distinction
A.P1 Explain the role of the government agencies in making policy that affects a local health and social care setting.	**A.M1** Assess ways local services and government agencies work together to make policy affecting a local health and social care setting.	**AB.D1** Evaluate how practice of a local health and social care setting is affected by government agency policy and other factors in meeting objectives and a specific need of a group of individuals.
B.P2 Explain factors that influence the ways that policy is made in the health and social care sector. **B.P3** Explain ways that organisations represent the needs of individuals with a specific need using health and social care.	**B.M2** Assess ways that organisations in the health and social care sector meet objectives set out by government agencies and represent the needs of individuals with a specific need.	

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Learning aim C: Explore the impact of policy on local health and social care organisations and individuals

Pass	Merit	Distinction
C.P4 Explain how the health and social care sector is affected by one piece of regulation. **C.P5** Compare how different local health care or social care organisations implement regulations and policies. **C.P6** Explain how policy affects individuals using health care or social care.	**C.M3** Assess the impact of regulations and policy on workers and individuals in different local health care or social care settings.	**C.D2** Evaluate ways that regulations and codes of practice affect workers and individuals in different local health care or social care settings. **C.D3** Evaluate whether policy making in health and social care has improved the health and wellbeing of individuals in different local health care or social care settings.

Transferable skills

Managing Yourself	Effective Learning	Interpersonal Skills	Solving Problems
MY – TPR	EL – MOL	IS – WC	SP – CT
MY – PS&R	EL – CL	IS – V&NC	SP – PS
MY – COP	EL – SRS	IS – T	SP – C&I
MY – PGS	EL – PRS	IS – C&SI	

Table key

*	Signposted to indicate opportunities for development as a part of wider teaching and learning
√	Embedded in teaching, learning and assessment
blank	Not embedded or signposted in unit

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Essential information for assignments

The recommended structure of assessment is shown in the unit summary, along with suitable forms of evidence. The *Pearson BTEC International Level 3 Qualifications Supplementary Information* document gives information on setting assignments. There is also further information on our website.

There is a maximum number of two summative assignments for this unit.

The relationship of the learning aims and criteria is:

Learning aims: A and B (A.P1, B.P2, B.P3, A.M1, B.M2, AB.D1)

Learning aim: C (C.P4, C.P5, C.P6, C.M3, C.D2, C.D3)

Further information for teachers and assessors

Resource requirements

For this unit, students must have access to:

- at least two different local health and social care settings
- relevant regulations relating to policy: all regulations must be up to date and applicable to the country of the setting.

Essential information for assessment decisions

Learning aims A and B

For distinction standard, students will evaluate and reach reasoned and valid judgements on the background to the policy-making process in the health and social care sector. Students must draw on knowledge and understanding of the role of government agencies in making policy affecting one local health and social care setting and the factors that influence this, making suitable justifications. They must use secondary research to justify the validity of priorities of organisations in representing the needs of individuals with a specific need using health and social care.

For merit standard, students will make reasoned, analytical judgements involving discussion of the background to the policy-making process in the health and social care sector. Students must interrelate facts, theories, concepts and contexts of the role of government agencies in making policy affecting one local health and social care setting and the factors that influence this, drawing suitable conclusions. They must use secondary research to extend understanding to detailed contexts of priorities of organisations in representing the needs of individuals with a specific need using health and social care.

For pass standard, students will recall and relate knowledge through understanding the background to the policy-making process in the health and social care sector. Students must select and organise information using appropriate knowledge and concepts of the role of government agencies in making policy affecting one local health and social care setting and the factors that influence this. They must use secondary research with relevance to priorities of organisations in representing the needs of individuals with a specific need using health and social care.

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Learning aim C

General note

Students can research two different local health care or social care settings.

For distinction standard, students will draw on research information to deepen understanding and arrive at original and valid conclusions on ways that two local health care or social care organisations implement current regulations and policies. Students must draw on information research to deepen understanding and arrive at original and valid conclusions about ways that policy and codes of practice affect individuals working in and using two different local health care or social care settings.

For merit standard, students will use research to extend understanding of ways that two local health care or social care organisations implement current regulations and policies. Students must record information effectively from a wide range of sources, or sources of particular relevance, to enable detailed analysis about ways that policy and codes of practice affect individuals working in and using two different local health care or social care settings.

For pass standard, students will use research with relevance to ways that two local health care or social care organisations implement current regulations and policies. Students must plan and carry out research using appropriate search and analysis techniques about ways that policy and codes of practice affect individuals working in and using two different local health care or social care settings.

Links to other units

This unit links to:

- Unit 3: Promoting Public Health
- Unit 5: Enquiries into Current Research in Health and Social Care
- Unit 8: Sociological Perspectives
- Unit 11: Supporting Individuals with Additional Needs.

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Unit 14: Caring for Individuals with Dementia

Level: 3

Unit type: Internal

Guided learning hours: 60

Unit in brief

Students explore the causes, symptoms and effects of dementia, and how person-centred care can support independence and wellbeing.

Unit introduction

Dementia is a growing global health challenge that affects millions of individuals and their families. Understanding the causes, symptoms and impacts of dementia is essential for health and social care professionals who aim to provide compassionate and effective care and support for individuals and their families.

In this unit, you will look at the complexities of dementia and the importance of maintaining dignity and independence for those affected. You will explore the different types of dementia, their underlying causes, and the range of symptoms individuals may experience. The unit emphasises person-centred care, safeguarding, and strategies to promote health and wellbeing. It also considers how modern technologies and inclusive practices can enhance quality of life for individuals living with dementia.

Completing this unit will prepare you for roles such as care assistant, support worker and healthcare assistant, and provides a strong foundation for higher education courses in health and social care, nursing and social work. The knowledge and skills gained will also support progression into specialist dementia care roles and equip you to adapt to emerging trends and innovations in the sector.

Learning aims

In this unit you will:

A Examine the types, causes and symptoms of dementia

B Examine the effects of dementia on individuals who have the condition

C Investigate the concept of person-centred care for individuals who have dementia to maintain quality of life and wellbeing.

Summary of unit

Learning aim	Key content areas	Assessment approach
A Examine the types, causes and symptoms of dementia	**A1** Types and causes of dementia **A2** Symptoms of dementia	Students will present information on the types, causes and symptoms of dementia, and the progressive effects on mental and physical health, quality of life and wellbeing of individuals who have the condition.
B Examine the effects of dementia on individuals who have the condition	**B1** Effects of dementia on mental and physical health **B2** Effects of dementia on quality of life and wellbeing	
C Investigate the concept of person-centred care for individuals who have dementia to maintain quality of life and wellbeing	**C1** Principles of person-centred care **C2** Safeguarding individuals who have dementia **C3** Assessment of needs, protection and safety **C4** Health and wellbeing **C5** Responsive and flexible care provision to maintain quality of life and wellbeing	Students will present information based on a case study of an individual who has dementia. Students will justifiy the impact and benefits of person-centred care on the individual, and evaluate how current practice in dementia care meets the individual's needs.

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Content

The essential content is set out under content areas. Students must cover all specified content before the assessment.

Learning aim A: Examine the types, causes and symptoms of dementia [EL – PRS]

A1 Types and causes of dementia

- Types and causes of particular dementias, to include:
  - Alzheimer's disease caused by neurodegeneration
  - vascular dementia caused by atherosclerosis and stroke
  - dementia with Lewy bodies (DLB) caused by abnormal collections of protein inside nerve cells in the brain, leading to motor difficulties and Parkinson's disease
  - frontotemporal dementia (FTD) caused by abnormal build-up of proteins in the brain behind the forehead and ears and more rarely caused by conditions such as CJD, head injury, Down's syndrome, leading to aphasia (difficulties with language)
- Digital health impacts (e.g. how technology aids diagnosis).
- Genetic research developments.
- Links to lifestyle factors, such as diet, exercise, social engagement.

A2 Symptoms of dementia

- The range of symptoms of dementia resulting from damage to the brain, to include:
  - Alzheimer's disease: significant memory loss, withdrawn from usual interests and activities, lost in familiar places, mood swings
  - vascular dementia: general forgetfulness, irritability, tremors, laughing or crying inappropriately, difficulties with familiar tasks such as handling money
  - dementia with Lewy bodies (DLB): difficulties with decision making and organisational tasks, repeated falling and fainting, sleep disturbances, difficulty swallowing
  - frontotemporal dementia (FTD): loss of inhibitions, impulsive behaviour, difficulty finding words, easily distractible
  - other common symptoms: confusion and forgetfulness, behaviour changes and mood swings, anxiety, loss of bowel and bladder control, difficulties with communication.

Learning aim B: Examine the effects of dementia on individuals who have the condition

B1 Effects of dementia on mental and physical health

- Reasoning and communication.
- Information processing.
- Sleeplessness and restlessness.
- Behaviour.
- Movement.
- Anxiety, fear and depression.
- Impact of social isolation in the digital age.
- Effects of virtual interactions.
- Mental health interventions via telehealth.

B2 Effects of dementia on quality of life and wellbeing

- Loss of dignity and privacy.
- Increasing difficulty in managing daily routine and personal care.
- Increasing inability to manage own affairs.
- Increasing lack of social interactions.
- Exclusion and loss of status.
- Loss of skills.
- Digital inclusion strategies (e.g. training older adults to use technology safely).
- Ethical considerations of monitoring technologies.

Learning aim C: Investigate the concept of person-centred care for individuals who have dementia to maintain quality of life and wellbeing

C1 Principles of person-centred care

- Care that recognises the uniqueness and personality of individuals who have dementia, to include:
  - dignity, privacy and respect
  - independence, rights and empowerment
  - digital literacy support
  - use of assistive AI tools (e.g. to analyse medical data for diagnosis, suggest personalised treatments, predict outcomes, manage administrative tasks)
  - recognition of cultural and religious differences and requirements
  - entitlement to advocacy.

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C2 Safeguarding individuals who have dementia

- Care that recognises the vulnerability and safety needs of individuals who have dementia, to include:
  - protection versus independence and rights (e.g. targeted staff training, technologies that alert staff but respect an individual's dignity and privacy)
  - safe, enabling/empowering environments (e.g. safe flooring and grab rails, music for reminiscence)
  - awareness of cultural and religious differences
  - ethical use of monitoring devices
  - protection against online scams targeting vulnerable individuals
  - awareness of representation and advocacy (e.g. lasting power of attorney).

C3 Assessment of needs, protection and safety

- How health and social care workers can help to manage everyday care after diagnosis, to include:
  - communication and behaviour needs (e.g. repetitive behaviour, restlessness)
  - aids and assistive technologies (e.g. practical aids, pagers/alarms, wearable health monitors)
  - diet and medication (e.g. awareness of food preferences, management of medication such as pill boxes, medication alarms, smart medication dispensers)
  - remote monitoring systems integrated with care plans
  - personal care routines (e.g. level of independence in personal hygiene, need to maintain privacy)
  - ensuring protection and limiting vulnerability (e.g. wandering, daily living, financial transactions)
  - maintaining a safe, enabling environment including services such as gas, hot water, home hygiene, trip hazards, room layout and decor, labels for cupboards, food safety.
- Developing research skills for health and social care investigations, including selecting secondary sources, planning and managing research.

C4 Health and wellbeing

- Care that takes a holistic approach to health and wellbeing for individuals who have dementia, to include:
  - safe handling and administration of medication
  - diet and nutrition (e.g. fluid intake, availability of healthy snacks, portion control)
  - complementary therapies (e.g. massage, aromatherapy)
  - activities and exercise (e.g. reminiscence work)
  - sensory stimulation (e.g. music, light strings).

C5 Responsive and flexible care provision to maintain quality of life and wellbeing

- How health and social care workers must continuously reflect on and review support so relevant care is maintained, and happiness and enjoyment in life is preserved, for an individual who has dementia, to include:
  - use of the care planning cycle, including regular reviews and forward planning to address fluctuating abilities and changing needs
  - virtual family meetings for care coordination
  - involvement of individual in their own care planning
  - involvement of family and friends in care planning
  - focus on individual's current strengths and abilities
  - individualised activities and exercise (e.g. sensory stimulation, dance, reminiscence activities)
  - combining interdisciplinary rehabilitation for individuals with dementia and informal caregiver support: strengths and limitations.

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Assessment criteria

Learning aim A: Examine the types, causes and symptoms of dementia

Learning aim B: Examine the effects of dementia on individuals who have the condition

Pass	Merit	Distinction
A.P1 Explain the causes of three different types of dementia. **A.P2** Explain the symptoms of three different types of dementia.	**A.M1** Analyse how the different types of dementia might be identified by their symptoms.	**AB.D1** Evaluate the importance of understanding how different types of dementia can have a progressive effect on all aspects of an individual's health and wellbeing.
B.P3 Explain the effects of three different types of dementia on the mental and physical health of individuals who have the condition. **B.P4** Explain the effects of three different types of dementia on the quality of life and wellbeing of individuals who have the condition.	**B.M2** Assess how the different types of dementia can have progressive effects on an individual's mental and physical health and their quality of life and wellbeing.	

Learning aim C: Investigate the concept of person-centred care for individuals who have dementia to maintain quality of life and wellbeing

Pass	Merit	Distinction
C.P5 Explain how person-centred care is applied for one individual who has one type of dementia. **C.P6** Explain why a flexible approach is needed when planning care for one individual who has one type of dementia.	**C.M3** Assess why the principles of person-centred care are important to maintain the dignity, rights and entitlements of one individual who has dementia.	**C.D2** Justify the impact and benefits of holistic person-centred care on one individual who has dementia. **C.D3** Evaluate how current practice in dementia care meets the needs of an individual with dementia, through managing its effects and maintaining health and wellbeing.

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Transferable skills

Managing Yourself	Effective Learning	Interpersonal Skills	Solving Problems
MY – TPR	EL – MOL	IS – WC	SP – CT
MY – PS&R	EL – CL	IS – V&NC	SP – PS
MY – COP	EL – SRS	IS – T	SP – C&I
MY – PGS	EL – PRS *	IS – C&SI	

Table key

*	Signposted to indicate opportunities for development as a part of wider teaching and learning
√	Embedded in teaching, learning and assessment
blank	Not embedded or signposted in unit

Essential information for assignments

The recommended structure of assessment is shown in the unit summary, along with suitable forms of evidence. The *Pearson BTEC International Level 3 Qualifications Supplementary Information* document gives information on setting assignments. There is also further information on our website.

There is a maximum number of two summative assignments for this unit.

The relationship of the learning aims and criteria is:

Learning aims: A and B (A.P1, A.P2, B.P3, B.P4, A.M1, B.M2, AB.D1)

Learning aim: C (C.P5, C.P6, C.M3, C.D2, C.D3)

Further information for teachers and assessors

Resource requirements

For this unit, students must have access to a local health and social care setting providing care for individuals with dementia. This could be students' work placement setting.

Essential information for assessment decisions

Learning aims A and B

For distinction standard, students will draw together their knowledge of the types, causes, symptoms and effects of dementia to evaluate the effects of different types of dementia on all aspects of an individual's life. They must give anonymised examples from health and social care settings of how workers' understanding of the progressive effects of dementia leads to good practice. Students must carry out research and analysis that is accurately referenced and acknowledged to reach and justify conclusions.

For merit standard, students will analyse symptoms of the chosen types of dementia to show how each type can be identified or diagnosed, given that a confident diagnosis can only be made after death. Students must make reasoned, analytical judgements involving comparison of the symptoms of the different types of dementia. Students will consider carefully each effect of dementia on an individual's life to make reasoned, analytical judgements involving comparison and discussion when assessing how an individual's mental and physical health may change, and how there may be progressive and changing effects on quality of life and wellbeing.

For pass standard, students will demonstrate their understanding of the types, causes, symptoms and effects of different types of dementia through drawing on relevant research regarding well-defined situations and contexts. For example, students could explain the effects of a type of dementia on the quality of life of an individual in specific situations, with no indication of how these effects are progressive over time. There may be some inaccuracies in technical terminology, but students must distinguish the types of dementia and their causes.

Learning aim C

For distinction standard, students will draw on their knowledge and understanding across learning aims to evaluate how managing and, if possible, alleviating the symptoms and effects of dementia can meet the needs of the individual. Students must use detailed analysis and research of the individual's type of dementia, symptoms, needs and care provision available to justify the validity of their judgements. Students must base their conclusions on their research into current best practice and judgement, and should show how research deepened their understanding to arrive at appropriate conclusions.

They must include evidence of their research, references and sources. Students will use appropriate vocational language and definitions of specific terminology. Students will justify the strengths and advantages of holistic person-centred care to the chosen individual who has dementia, including the consequences of not following a person-centred approach. Students must show how person-centred care is applied to all aspects of daily living based on the individual's needs. Students must carry out independent detailed research into the care provided for their chosen individual to reach justified conclusions. Students' research must be accurately referenced and acknowledged, and their evaluations cohesive and articulate.

For merit standard, students will reach reasoned judgements by contrasting working within the principles of person-centred care with care that is not person-centred. They must relate the care provided for the individual with dementia to the concept of person-centred care principles to draw suitable conclusions. Students will use research from relevant sources to extend their understanding of the principles to less well-defined or familiar situations, for example the need to balance the individual's independence and empowerment with ensuring the individual's safety when planning outings. They must use appropriate vocational language and definitions of specific terminology, and include references to current care practice guidance.

For pass standard, students will explain the needs of the individual, giving an insight into the individual's personality, behaviours, likes, dislikes and mobility. Students must relate the principles of person-centred care to appropriate care provision made for the individual's safeguarding and health and wellbeing. Students must also include the responsibilities of health and social care workers in involving the individual and their family and friends in planning person-centred care, ensuring that recommendations are responsible and flexible. Students will include the benefits of a flexible response to care needs for the individual who has dementia, showing how recommendations for care should be made with future changing needs in mind, and how recommendations should be modified to suit the individual's changing needs and situation, and any contingencies. Students must demonstrate their knowledge through exploring well-defined situations and contexts, such as ensuring the individual receives appropriate nutrition, while taking account of food preferences. Students must use research relevant to the individual's situation and organise information using appropriate knowledge, leading to suitable judgements.

Links to other units

This unit links to:

- Unit 1: Human Lifespan Development
- Unit 4: Principles of Safe Practice in Health and Social Care.

This unit may be taught alongside:

- Unit 5: Enquiries into Current Research in Health and Social Care
- Unit 6: Psychological Perspectives
- Unit 8: Sociological Perspectives
- Unit 9: Principles of Effective Care
- Unit 11: Supporting Individuals with Additional Needs
- Unit 16: Nutritional Health
- Unit 17: Understanding Mental Wellbeing
- Unit 23: Work Experience in Health and Social Care.

Unit 15: Assessing Children's Development Support Needs

Level: 3

Unit type: Internal

Guided learning hours: 60

Unit in brief

Students will explore how children develop from birth to eight years, the factors influencing this process, and the role of assessment in identifying and supporting their individual needs.

Unit introduction

To provide the care and support that children need, it is important that you have a good understanding of how they grow and develop. This unit introduces you to the patterns of growth and development in children, from birth up to eight years, across different areas and aspects of development.

In this unit, you will learn about the stages and principles of growth and development. You will look at some of the theories about how children develop, and learn and recognise how these theories are applied to help children achieve their developmental milestones. You will examine factors that can affect how children grow and develop, including those that are personal to the child, such as a disability, and external factors, such as whether they have access to good-quality care and health services. You will explore the different methods professionals use across children's services and carry out an observation of your own. You will need to reflect on these methods to consider the importance of assessment so you can plan to support children's individual needs.

This unit will help you to identify and assess development and support needs of children to enable you to progress to degrees in the sector such as nursing and social work. It will be useful for students intending to pursue a career in children's social care or health care, such as in child assessment centres and as health visitors or paediatric nurses.

Learning aims

In this unit you will:

A Understand patterns, principles and theories that contribute to an understanding of growth and development in children from birth to eight years

B Examine factors that may impact on children's growth and development

C Explore how assessment is used to identify children's stages of growth and development and their support needs.

Summary of unit

Learning aim	Key content areas	Assessment approach
A Understand patterns, principles and theories that contribute to an understanding of growth and development in children from birth to eight years	**A1** Patterns of growth and development **A2** Principles of growth and development **A3** Theories of development	Students will present information on principles and patterns of growth and development and related theories, and how this knowledge can support children's growth and development, in response to case studies of children at different ages.
B Examine factors that may impact on children's growth and development	**B1** Factors **B2** The impact of factors on growth and development	Students will present information based on own observations of children, explaining the impact that factors may have on children's growth, and how assessment supports and promotes children's growth and development. The report must include plans for observations, records of observations, and a reflective account.
C Explore how assessment is used to identify children's stages of growth and development and their support needs	**C1** Assessment methods **C2** The contribution of assessment to the promotion of children's growth and development	

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Content

The essential content is set out under content areas. Students must cover all specified content before the assessment.

Learning aim A: Understand patterns, principles and theories that contribute to an understanding of growth and development in children from birth to eight years

A1 Patterns of growth and development

- Definition of growth and development.
- Developmental milestones for children between birth and eight years.
- Areas and aspects of development:
  - physical, to include fine and gross motor development, locomotion, balance
  - coordination, hand-eye coordination
  - intellectual/cognitive, to include neurological and brain development
  - development of abstract concepts, thinking skills, memory
  - speech, language and communication
  - emotional, to include the development of self-identity, self-esteem, attachment, independence, moral development
  - social, to include developing friendships, cooperation
  - digital literacy and technology exposure as part of cognitive and social development (e.g. impact of screen time, online communication skills).

A2 Principles of growth and development

- Rates of growth and development vary between children.
- How growth can impact on each of the areas of development.
- Patterns of typical development.
- Different areas of development advance at different rates.
- Development is holistic.
- Atypical development: global delay, specific delay; children who are gifted, talented or able in one or more areas of development.

A3 Theories of development

Students require an overview of how the following theories contribute to an understanding of growth and development.

- Cognitive development, to include Piaget, Vygotsky, information processing theory.
- Behaviourism, to include Watson, Skinner, Bandura.
- Emotional and social development, to include Bowlby, Rutter, Erikson, Maslow, Harter.
- Moral development, to include Kohlberg, Piaget.
- Language development, to include Chomsky, Vygotsky.

Learning aim B: Examine factors that may impact on children's growth and development

B1 Factors

- Personal factors, to include health, disability, genetic inheritance.
- Pre-natal factors, to include care during pregnancy, genetic disease, lifestyle of mother, to include diet.
- Socio-economic factors, to include low-income families, access to health and education services, culture, diet.
- Environmental factors, to include housing, pollution, climate change, environmental stressors (e.g. displacement, air quality).
- Emotional factors, to include domestic harm, poor attachment, impact of social media, cyberbullying, digital inequity.
- Transitions, to include personal transitions that happen to all children (e.g. starting school) and particular transitions that children may experience (e.g. family breakdown).

B2 The impact of factors on growth and development

- The impact may be: short term, long term.
- Failure to grow and thrive.
- Delayed or enhanced development.
- How the impact on one area of development may affect other areas.
- How factors may be counterbalanced by other factors (e.g. providing free nursery places for children in low income families).

Learning aim C: Explore how assessment is used to identify children's stages of growth and development and their support needs

C1 Assessment methods

- Formal, informal, formative, summative.
- Developmental screening programmes.
- Growth monitoring: measuring and recording growth, to include centile charts.
- Assessment frameworks, to include Assessment Triangle (child's developmental needs, parenting capacity, family/environmental factors), curriculum frameworks for home country.

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- How to plan and carry out assessment through observation, to include:
  - methods of recording (e.g. checklist, time sample observation sheet)
  - areas of development
  - timing and environmental considerations
  - ethical issues, to include permissions, confidentiality
  - using milestones to compare a child's stage of development against typical development
  - remote observation techniques for virtual learning environments.
- The involvement of parents in assessment.
- The importance of sharing information with colleagues, other professionals, the child and their family.

C2 The contribution of assessment to the promotion of children's growth and development

- Early identification of children failing to grow or thrive.
- Early identification of atypical development.
- Interventions to support and promote development, to include care plans, learning plans, behaviour plans, specialist support from health professionals.
- The importance of monitoring and reviewing interventions.
- Data privacy and safeguarding in digital assessments, ensuring ethical use of technology in child development monitoring.
- Inclusive practices and culturally responsive assessment, to reflect diversity and global perspectives.

Assessment criteria

Learning aim A: Understand patterns, principles and theories that contribute to an understanding of growth and development in children from birth to eight years

Pass	Merit	Distinction
A.P1 Explain patterns of growth and development of selected children of different ages. **A.P2** Explain principles and theories that contribute to an understanding of the children's growth and development.	**A.M1** Analyse stages of growth and development across different areas for selected children of different ages. **A.M2** Assess how theories can be used to identify the children's stages of growth and development.	**A.D1** Evaluate the extent to which theories of growth and development can be used to support the selected children's growth and development.

Learning aim B: Examine factors that may impact on children's growth and development

Learning aim C: Explore how assessment is used to identify children's stages of growth and development and their support needs

Pass	Merit	Distinction
B.P3 Describe the influence of factors on children's growth and development.	**B.M3** Assess how one area of development affected by factors may impact on other areas of development.	**BC.D2** Justify approaches to assessment used for the early recognition and support for children with differing needs. **BC.D3** Evaluate the extent to which professionals help children to meet their developmental milestones through the application of the theories of growth and development and use of assessment methods.
C.P4 Explain methods used for the assessment of children's growth and development from birth to eight years. **C.P5** Plan for and observe children to identify their stages of development.	**C.M4** Effectively plan and implement appropriate methods of assessment to identify the children's stages of development. **C.M5** Assess the methods of observation selected for the assessment of each child's growth and development.	

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Transferable skills

Managing Yourself	Effective Learning	Interpersonal Skills	Solving Problems
MY – TPR	EL – MOL	IS – WC	SP – CT
MY – PS&R	EL – CL	IS – V&NC	SP – PS
MY – COP	EL – SRS	IS – T	SP – C&I
MY – PGS	EL – PRS	IS – C&SI	

Table key

*	Signposted to indicate opportunities for development as a part of wider teaching and learning
√	Embedded in teaching, learning and assessment
blank	Not embedded or signposted in unit

Essential information for assignments

The recommended structure of assessment is shown in the unit summary, along with suitable forms of evidence. The *Pearson BTEC International Level 3 Qualifications Supplementary Information* document gives information on setting assignments. There is also further information on our website.

There is a maximum number of two summative assignments for this unit.

The relationship of the learning aims and criteria is:

Learning aim: A (A.P1, A.P2, A.M1, A.M2, A.D1)

Learning aims: B and C (B.P3, C.P4, C.P5, B.M3, C.M4, C.M5, BC.D2, BC.D3)

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Further information for teachers and assessors

Resource requirements

For this unit, students should have access to local health or social care settings that will enable them to carry out observations of children's development. Ideally, this should be students' work experience placement.

Essential information for assessment decisions

Learning aim A

For distinction standard, students will draw together their understanding of theories that explain patterns of growth and development. Students will use this knowledge to evaluate the extent to which these theories can be applied in practice to support children at different stages of growth and development. They must consider the advantages and disadvantages of the selected theories, and use detailed analysis and research to reach reasoned and valid conclusions and recommendations. They must articulate their views concisely and professionally.

For merit standard, students will use vocational language to analyse each child's previous stage of development, their current stage, and the stage they are working toward. Their evidence must include all areas of development and be supported by research of milestones from a recognised source. Students must demonstrate the relevance of each selected theory, making analytical judgements on the value of each in explaining each child's stage of growth and development. For example, they could consider how Piaget's constructivist approach helps to explain a child's cognitive development, or how Bowlby's theory of attachment helps professionals to understand a child's emotional development. Students must show awareness of the suitability of the selected theories in identifying stages of development and any limitations to their usefulness.

For pass standard, students will recall and relate knowledge of expected patterns of development to each case study in some detail. Evidence must be supported by examples from the descriptions of what the child can do and the skills they are using. Students must state whether the child has reached the typical stage of development for their age group in each of the areas of development. If the child has not, they must explain the stage they would be expected to have reached with reference to milestones. Students must explain the key principles of development, showing an understanding that the children in each case study will have passed through the same stages but at different rates. Students must explain, supported by reasoned arguments, how selected theories can help professionals come to a conclusion about the development of each child. Their references to areas and stages of development will depend on their selected theory. For example, if students explore Piaget's theory of cognitive development, they will focus on how his theory helps to explain how children think and learn, and the cognitive stage they have reached.

Learning aims B and C

For distinction standard, students must consider the different approaches they used for the assessments, evaluating the strengths and weakness of each in identifying children's differing needs and any signs of atypical development. Students will make reasoned judgements about the risks and limitations of the assessment methods they used. They must consider how these assessment methods contribute to the assessment process and support children to reach their full potential. Students must draw on the observations they carried out, showing that they provided a valid insight into the children's stages of development. Students must make reasoned judgements about how the application of theories and use of assessment enable early recognition of delayed or advanced development in one or more areas of development, and the importance of this early recognition. Students must suggest forms of intervention and support that can be put into place as a result of assessment and arrive at a justified conclusion of how this can have a positive impact on the outcomes for children.

For merit standard, students will carefully consider each area of development that has been affected by the selected factors, and draw conclusions about how each may impact on the other areas of development and the possible level of that impact. Evidence could be supported by examples from observations from students' work experience placement, case studies and independent research. Students must demonstrate understanding of more complex interrelationships between influencing factors and growth and development, and make reasoned, analytical judgements. Students must be observed carrying out observations of the two children, confidently using appropriate techniques and adapting these techniques if necessary. They must give supported reasons for selecting each method of observation. Students must actively reflect on the success of each method in enabling them to capture evidence from their observations. They must also reflect on their recording method for conveying information clearly to colleagues, other professionals or parents, seeking feedback to justify their conclusion.

For pass standard, students will determine for each factor the type and level of impact that it may have on children's growth and development. Students must also explain how the effects of some factors may be balanced or reduced by the effects of other factors. Their conclusions about possible impact should be supported by examples from their research. Students must explain different forms of assessment, including screening programmes and observation. They must demonstrate their understanding by applying their knowledge to everyday situations in a children's setting. They must explain the purpose of assessment, and when and how it is carried out across different children's settings. Students must develop coherent plans, carry out observations of two children, and select an appropriate method for recording. They must select and deploy appropriate observation methods and skills in well-defined situations. They must carry out the observations fully, correctly and safely to identify the children's stages of development with reference to developmental milestones.

Links to other units

This unit links to:

- Unit 1: Human Lifespan Development.

This unit may be taught alongside:

- Unit 5: Enquiries into Current Research in Health and Social Care
- Unit 6: Psychological Perspectives
- Unit 8: Sociological Perspectives
- Unit 9: Principles of Effective Care
- Unit 11: Supporting Individuals with Additional Needs.

Unit 16: Nutritional Health

Level: 3

Unit type: Internal

Guided learning hours: 60

Unit in brief

Students explore the principles of nutritional health and the factors influencing dietary choices, and develop practical skills to assess and improve individual nutrition.

Unit introduction

Nutrition plays a vital role in maintaining health and wellbeing throughout life. Understanding what constitutes a balanced diet and how nutrients support bodily functions is essential for preventing illness and promoting recovery. In today's world, where lifestyle-related conditions such as obesity and diabetes are increasingly common, knowledge of nutritional health is more important than ever.

In this unit, you will learn the principles of good nutrition, the characteristics of essential nutrients, and the factors that influence dietary choices. You will examine how cultural, social and economic factors shape eating habits, and consider the impact of medical conditions and food intolerances on nutritional health. You will develop practical skills in assessing dietary intake and creating tailored nutrition plans, and professional behaviours such as evaluation of dietary information and responsible application of nutritional guidelines.

Completing this unit equips you with essential knowledge and practical skills in nutritional health. It provides a strong foundation for progression into careers such as dietetics, nutrition consultancy and health education. It also supports further study in health and social care disciplines, including nursing, midwifery and public health. The knowledge and skills gained will enable you to apply evidence-based approaches to improving nutritional health in diverse settings, preparing you for both higher education and professional practice. In addition, the unit develops transferable skills such as research, communication and critical thinking, helping you to build confidence and independence in applying nutritional knowledge to real-world contexts.

Learning aims

In this unit you will:

A Understand concepts of nutritional health and characteristics of essential nutrients

B Examine factors affecting dietary intake and nutritional health

C Develop nutrition plans to improve individuals' health and lifestyle.

Summary of unit

Learning aim	Key content areas	Assessment approach
A Understand concepts of nutritional health and characteristics of essential nutrients	**A1** Concepts of nutritional health **A2** Nutritional measures and recommended dietary intakes **A3** Characteristics of essential nutrients	Students will present information relating to dietary intake and essential nutrients to two individuals with different needs, considering the factors influencing their nutritional health.
B Examine factors affecting dietary intake and nutritional health	**B1** Dietary needs of individuals **B2** Factors affecting nutritional health **B3** Factors affecting dietary intake	
C Develop nutrition plans to improve individuals' health and lifestyle	**C1** Assessment of nutrient intake **C2** Nutritional health improvement plan	Students will design and present plans to improve the nutritional health of two individuals with different needs, showing the application of concepts to realistic situations.

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Content

The essential content is set out under content areas. Students must cover all specified content before the assessment.

Learning aim A: Understand concepts of nutritional health and characteristics of essential nutrients

A1 Concepts of nutritional health

- Healthy eating and a balanced diet (e.g. Eatwell Guide, main food groups, plant-based diets, flexitarian approaches), sustainable diets (e.g. planetary health diet).
- Malnutrition, including undernutrition, obesity.
- Effects of food processing and preparation methods, including excessive salt and sugar content, additives.
- Current nutritional issues and effects on health, including self-prescribed health supplements, genetically modified food, digital health trends (nutrition apps, wearable trackers), personalised nutrition based on genetics.

A2 Nutritional measures and recommended dietary intakes

- Balancing energy requirements for protein, fat, carbohydrate (kilocalories and kilojoules).
- Measuring body mass index (BMI).
- Using growth charts to monitor weight gain.
- Using and interpreting Dietary Reference Values (DRVs), Reference Nutrient Intakes (RNIs), nutrients per portion and per 100g of food, global guidelines (WHO Sustainable Development Goals and Global Nutrition Targets), recommendations on sugar, salt and fibre intake.

A3 Characteristics of essential nutrients

Characteristics for each nutrient, to include the function in the body, examples of dietary sources and effects of dietary deficiency.

- Essential nutrients, to include:
  - carbohydrates: simple (sugars), complex (starch and non-starch polysaccharides)
  - proteins: polypeptides, essential and non-essential amino acids
  - fats and oils: mono- and polyunsaturated fats, saturates, cis and trans fats, cholesterol
  - vitamins: A, B (complex), C, D, E, K
  - minerals: calcium, iron, sodium
  - water
  - fibre

  - functional food components: phytonutrients, probiotics and prebiotics, omega-3 from plant sources and the link to promoting gut health and mental health.
- Functions in the body, to include:
  - growth and repair of body tissue (protein)
  - warmth and energy (carbohydrates and fats)
  - maintaining body functions, including digestion, immunity, healthy nervous system, red blood cells (vitamins and minerals).
- Dietary sources, to include:
  - animal and plant sources of protein (e.g. meat, soya)
  - starch and sugar sources of carbohydrate (e.g. pasta, biscuits)
  - animal and plant sources of fat (e.g. fish oils, butter, nuts)
  - dietary and natural sources of vitamins (e.g. fruit and vegetables, sunlight on the skin)
  - animal and plant sources of minerals (e.g. red meat, green vegetables)
  - plant sources of fibre (e.g. wholegrain cereals, vegetables).
- Dietary deficiencies, to include:
  - protein, including specific dietary needs of vegans and vegetarians
  - carbohydrate, including reduced energy levels and special needs of individuals with diabetes
  - vitamins, including scurvy, rickets
  - minerals, including iron deficiency anaemia, osteoporosis.

Learning aim B: Examine factors affecting dietary intake and nutritional health

B1 Dietary needs of individuals

- Dietary needs of different groups of individuals including:
  - children (e.g. protein for growth, minimising sugar and additives)
  - young people (e.g. carbohydrate for energy needs)
  - adults (e.g. monitoring calorie intake to minimise obesity)
  - older people (e.g. calcium to help prevent osteoporosis)
  - pregnant women (e.g. iron to help prevent anaemia)
  - breastfeeding mothers (e.g. limiting caffeine intake to prevent baby restlessness).

B2 Factors affecting nutritional health

- Dietary habits, including meal patterns, snacking, personal preference (e.g. vegetarian).
- Lifestyle, including social eating and drinking, exercise/activity levels.
- Socio-economic, including cost of food, access to shopping facilities.
- Cultural, including religious and cultural beliefs, traditional dietary patterns, role of food in families and communities.

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- Education, including public health, food hygiene, marketing and labelling, role of health professionals.
- Food insecurity and climate change impact, social media influence on diet trends, ethical considerations in food choices.
- Relevant guidance, including current policies from national and international bodies (e.g. WHO, FAO), government guidance (e.g. global sustainability frameworks, food labelling for environmental impact – eco-labels).

B3 Factors affecting dietary intake

- Specific conditions, including diabetes mellitus, coronary heart disease, emerging conditions linked to diet such as non-alcoholic fatty liver disease (NAFLD), mental health disorders influenced by nutrition.
- Digestive disorders, including irritable bowel syndrome, Crohn's disease.
- Food allergies and intolerances, including coeliac disease, lactose intolerance.
- Loss of ability to feed independently, including paralysis, stroke, neurodegenerative conditions.
- Alternative methods of feeding, including nasogastric tubes (NGT), percutaneous endoscopic gastrostomy (PEG) tubes, intravenous infusion (IVI), total parental nutrition (TPN), thickened fluids; advances in medical nutrition therapy.

Learning aim C: Develop nutrition plans to improve individuals' health and lifestyle

C1 Assessment of nutrient intake

- How to record food intake, including meals, snacks, drinks, portion sizes.
- Maintaining nutritional needs, including assessing nutritional status (e.g. Malnutrition Universal Screening Tool), fluid balance, food charts.
- Sources of nutritional information, including food analysis tables (database or printed), charts relating to portion sizes, information on food packaging (especially for processed foods).
- Quantitative analysis, including energy, protein, fat, iron, vitamin C, fibre intakes, and calculation of energy distribution from macronutrients (protein, fat, carbohydrate).
- Assessment of analysis, including comparison with recommended intakes (e.g. Dietary Reference Values (DRVs), Reference Nutrient Intakes (RNIs) or country-specific recommendations) and general health targets.

C2 Nutritional health improvement plan

- Recommendations for meals, snacks, drinks, portion size, cooking methods, sustainable cooking practices, low-carbon meal planning, digital meal planning tools.
- Recommendations for activity level, daily exercise, energy expenditure.
- Recommendations relating to lifestyle and personal food preferences (e.g. cultural, socio-economic).
- How the plan will be monitored and evaluated for effectiveness, including methods for review and modification.

Assessment criteria

Learning aim A: Understand concepts of nutritional health and characteristics of essential nutrients

Learning aim B: Examine factors affecting dietary intake and nutritional health

Pass	Merit	Distinction
A.P1 Explain how the concepts of nutritional health contribute to health and wellbeing. **A.P2** Explain the sources of essential nutrients and their functions in the body.	**A.M1** Assess the impact of dietary intake and dietary deficiencies on nutritional health.	**AB.D1** Evaluate the role of nutritional health in maintaining the selected individuals' health and wellbeing, and the impact of influencing factors.
B.P3 Explain the health, socio-economic and cultural factors that can influence the nutritional health of the selected individuals. [EL – SRS] **B.P4** Compare the dietary intake of the selected individuals with their nutritional requirements.	**B.M2** Assess how the dietary intake and nutritional health of the selected individuals are influenced by their dietary habits and lifestyle choices.	

Learning aim C: Develop nutrition plans to improve individuals' health and lifestyle

Pass	Merit	Distinction
C.P5 Produce clear plans to improve the nutritional health of two individuals with different dietary needs. **C.P6** Explain how the recommendations will improve the nutritional health of the selected individuals. [SP – C&I]	**C.M3** Produce professionally presented plans to improve the nutritional health of two individuals with different dietary needs. **C.M4** Analyse how the recommendations will improve the nutritional health of the selected individuals.	**C.D2** Justify the recommendations in the plans in relation to the needs and situations of the selected individuals. **C.D3** Evaluate the importance of planning nutritional health for selected individuals to ensure their dietary needs are met, and that influencing factors are taken into account.

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Transferable skills

Managing Yourself	Effective Learning	Interpersonal Skills	Solving Problems
MY – TPR	EL – MOL	IS – WC	SP – CT
MY – PS&R	EL – CL	IS – V&NC	SP – PS
MY – COP	EL – SRS √	IS – T	SP – C&I √
MY – PGS	EL – PRS	IS – C&SI	

Table key

*	Signposted to indicate opportunities for development as a part of wider teaching and learning
√	Embedded in teaching, learning and assessment
blank	Not embedded or signposted in unit

Essential information for assignments

The recommended structure of assessment is shown in the unit summary, along with suitable forms of evidence. The *Pearson BTEC International Level 3 Qualifications Supplementary Information* document gives information on setting assignments. There is also further information on our website.

There is a maximum number of two summative assignments for this unit.

The relationship of the learning aims and criteria is:

Learning aims: A and B (A.P1, A.P2, B.P3, B.P4, A.M1, B.M2, AB.D1)

Learning aim: C (C.P5, C.P6, C.M3, C.M4, C.D2, C.D3)

Further information for teachers and assessors

Resource requirements

For this unit, students should have access to local health or social care settings that will allow them to research and gather information on the nutritional health of two individuals in order to develop 1-month plans to improve their nutritional health. Ideally, this should include students' work experience placement.

The individuals on which students base their assignments do not need to be from the same setting. Alternatively, students may base their assignments on family members, neighbours or friends. In all cases, confidentiality must be respected and students must be supervised.

Students must have access to current local guidance and government guidelines relating to nutritional health.

Essential information for assessment decisions

Learning aims A and B

For distinction standard, students will articulate their arguments and views concisely and professionally to justify their conclusions. Students must make a detailed analysis of their research to show that they have considered how nutritional health influences the overall health and wellbeing of the two individuals, and the impact of influencing factors on the nutritional health of each. For example, snacking between meals and low levels of exercise could contribute to obesity, and the high cost of some foods or lack of access to shops could lead to dietary deficiencies.

For merit standard, students will show that they have selected and applied relevant knowledge, including the relationship between Reference Nutrient Intakes (RNIs) and individual dietary needs, such as energy requirements. Students must interrelate theories, concepts and contexts, for example specific examples of the consequences of not following recommended dietary intakes, such as coronary heart disease arising as a result of high cholesterol intake. Students must also demonstrate understanding of complex concepts such as the relationship between dietary habits, lifestyle choices and nutritional health, for example the impact that caffeine intake has on personal snacking habits.

For pass standard, students will give an account of the concepts of nutritional health and apply their understanding to two selected individuals, such as the importance of limiting sugar intake, the effects of malnutrition on health, and how body mass index (BMI) is used as a measure of obesity. Similarly, when considering the function of nutrients in the body, students could explain that vitamin D is necessary for the absorption of calcium, which is needed for strong bones, and vitamin D deficiency results in rickets. Students will cover reasons for individual dietary needs, such as iron in pregnancy to prevent anaemia or protein and carbohydrate for young children's growth and energy requirements. Students will

use well-defined or familiar applications of knowledge. When explaining the health, socio-economic and cultural factors that can influence nutritional health, they may address how factors such as specific medical conditions could lead to a loss of ability to feed independently, or how a limited budget for food can reduce choices, or how religious beliefs may lead to periods of fasting or specific food choices. Students' research, including the use of numerical and graphical data, will be relevant and must be organised to show how appropriate knowledge has been used to reach suitable judgements. Students will use this data to calculate the selected individuals' key nutrient and energy intakes and compare them against established recommended intakes.

Learning aim C

General note

This assignment could be based on the same two individuals studied for assignment 1, or two different individuals. The individuals should be at different life stages and have contrasting nutritional needs.

As a centre, you need to ensure that students respect the confidentiality of the two individuals, and the task must be carried out within college or a health or social care setting, with an appropriate supervisor.

For distinction standard, students will justify their recommendations by drawing together their knowledge and understanding across the learning aims, articulating their arguments concisely and professionally to make suitable justifications and recommendations. Students must give reasons to support their ideas about the concepts of nutritional health, the importance of healthy eating, and the significance of monitoring the nutritional health of the individuals. They must use examples to demonstrate their understanding of how improvements to nutrition can also improve overall health and wellbeing. Students must also consider any influencing factors and how they should be dealt with when planning nutritional health for the individuals.

Students must articulate their arguments and views concisely and professionally, and demonstrate their understanding through applying valid knowledge to less-familiar situations, such as making recommendations to improve the nutritional health of individuals with specific conditions, such as diabetes. Students must consider the importance of essential nutrients at different life stages and the consequences of not meeting nutritional needs.

For merit standard, students will present their plans in a professional manner, setting out the information in language appropriate for the individuals. Students will apply their knowledge to detailed situations, such as taking into account the individual's personal choices and habits. Students' recommendations must be relevant and related to the nutritional health and specific situation of each individual. Students must consider the recommendations in their plans and identify how each will improve nutritional health by comparing food intake to recommended dietary intakes, or comparing activity levels to

general health targets, for example. Students must use their research into the individuals to identify solutions by interrelating facts and concepts, analysing the interrelationship between the individual's lifestyle, clinical factors and the plan's feasibility.

For pass standard, students will apply understanding by carrying out appropriate nutritional analysis and calculations, including recording both individuals' food intake and using food analysis tables to determine the necessary recommendations. Their plans must be clearly set out in a way that can be used by the individuals and structured to include relevant information, using appropriate vocational language. The plans must include recommendations for food intake, activity level and lifestyle changes, and explain the expected impact of the recommendations. The plan will be specific to the needs of each individual, to aid weight loss or improve medical health, for example, and include a method for monitoring and reviewing progress.

Links to other units

This unit links to:

- Unit 1: Human Lifespan Development
- Unit 2: Anatomy and Physiology for Health and Social Care.

This unit may be taught alongside:

- Unit 5: Enquiries into Current Research in Health and Social Care
- Unit 9: Principles of Effective Care
- Unit 10: Physiological Disorders and their Care
- Unit 20: Biochemistry for Health.

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Unit 17: Understanding Mental Wellbeing

Level: 3

Unit type: Internal

Guided learning hours: 60

Unit in brief

Students explore the nature of mental wellbeing and mental health, including factors that influence them and strategies to promote positive outcomes.

Unit introduction

Mental health is a vital component of overall wellbeing, influencing how individuals think, feel and interact with the world around them. In today's fast-paced and interconnected society, understanding mental wellbeing is more important than ever. This unit explores the concepts of mental health and mental wellbeing, examining how they are defined, perceived and measured across different cultures and contexts.

You will investigate the main forms of mental ill health, their classification, and the impact these conditions have on individuals and their social networks. The unit also considers strategies for promoting mental wellbeing, including guidance, policies and modern approaches to assessment and treatment. Emerging themes such as digital wellbeing, trauma-informed care and global mental health challenges will be integrated to reflect contemporary issues.

Studying this unit provides a strong foundation for progression into careers and further study in health and social care. It develops critical thinking, analytical skills and practical understanding that are essential for roles such as mental health nurse, social worker or wellbeing practitioner.

Learning aims

In this unit you will:

A Understand different views on the nature of mental wellbeing and mental health

B Examine how the main forms of mental ill health are classified

C Examine the impact of mental ill health on individuals and others in their social networks

D Examine strategies that promote mental wellbeing and mental health.

Summary of unit

Learning aim	Key content areas	Assessment approach
A Understand different views on the nature of mental wellbeing and mental health	**A1** Ways in which mental wellbeing and mental health are understood **A2** Factors that affect mental wellbeing and mental health across the lifespan	Students will present information, using a case study, on the nature of mental health and wellbeing and the role of current classification systems in improving the diagnosis of two selected mental ill-health conditions and their symptoms.
B Examine how the main forms of mental ill health are classified	**B1** Recognised mental ill-health conditions and their symptoms according to current classification systems **B2** Strengths and limitations of classification systems	
C Examine the impact of mental ill health on individuals and others in their social networks	**C1** The impact of mental ill health on individuals **C2** Mental ill health and relationships	Students will present information on the importance of promoting, protecting and restoring the mental wellbeing and mental health of a selected individual diagnosed with a mental ill-health condition.
D Examine strategies that promote mental wellbeing and mental health	**D1** Guidance, policies and codes of practice **D2** Assessment and treatment	

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Content

The essential content is set out under content areas. Students must cover all specified content before the assessment.

Learning aim A: Understand different views on the nature of mental wellbeing and mental health

A1 Ways in which mental wellbeing and mental health are understood

- The meaning of mental wellbeing and mental health.
- Perception of mental wellbeing and mental health.
- Mental capacity.
- The Dual Axis model of mental health.
- Measurements and scales that measure mental wellbeing.
- Cultural influences in understanding mental wellbeing and mental health.
- Digital wellbeing (impact of social media, screen time, online communities).
- Neurodiversity awareness (e.g. autism, ADHD as part of mental health discourse).
- Trauma-informed perspectives.
- Global mental health trends (e.g. World Health Organization (WHO) initiatives, climate anxiety).

A2 Factors that affect mental wellbeing and mental health across the lifespan

- Environment factors.
- Life experiences.
- Socio-economic factors.
- Psychological factors.
- Risk factors.
- Protective factors.
- Biological factors.
- Race, cultural and religious factors.
- Race and ethnicity.
- Impact of technology and AI on mental health.
- Climate change and eco-anxiety.
- Workplace mental health in remote/hybrid settings.
- Intersectionality.

Learning aim B: Examine how the main forms of mental ill health are classified

B1 Recognised mental ill-health conditions and their symptoms according to current classification systems

- Categories within the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD), e.g.:
  - mood disorders
  - personality disorders
  - anxiety disorders
  - psychotic disorders
  - substance-related disorders
  - eating disorders
  - cognitive disorders.
- Emerging conditions, such as gaming disorder (recognised by WHO).
- Digital addiction and social media-related anxiety.
- Long COVID mental health impacts.
- Burnout as a diagnosable condition (ICD-11).

B2 Strengths and limitations of classification systems

- Raising awareness of mental ill health.
- Influencing the research agenda.
- Labelling and stigmatisation.
- The diagnosis of the main depressive disorders.
- Atypical presentations.
- Cross-cultural implications.
- Global disparities in access to diagnosis tools.
- Cultural humility in classification systems.

Learning aim C: Examine the impact of mental ill health on individuals and others in their social networks

C1 The impact of mental ill health on individuals

- Psychological and emotional outcomes.
- The effects of medication.
- The outcomes of psychological treatments (e.g. counselling).
- Other treatments.
- Ethical considerations, to include informed consent.
- Impact of digital therapy and telehealth.

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- Role of peer support networks and online communities.
- Personal data privacy in mental health care.

C2 Mental ill health and relationships

- How mental ill health might have an impact on individuals' relationships, e.g.:
  - practical and financial outcomes
  - the impact of using services
  - social exclusion
  - discrimination and stigma
  - the effects on informal carers and family members
  - the impact on the community and society
  - impact of remote work and digital isolation
  - online harassment and cyberbullying effects
  - community resilience in crisis (pandemics, disasters)
  - global migration and mental health challenges.

Learning aim D: Examine strategies that promote mental wellbeing and mental health

D1 Guidance, policies and codes of practice

- Guidance must be current and applicable to the region in which students live and be relevant to areas such as:
  - mental health
  - human rights
  - mental capacity
  - equity
  - relevant codes of practice
  - mental health impact of policy and practice
  - digital health regulations and data protection guidance
  - global mental health policy frameworks
  - workplace mental health guidance for remote work
  - AI ethics in mental health care.

D2 Assessment and treatment

- The assessment of need.
- The role of professionals in the assessment process.
- Integration of digital tools (telehealth platforms).
- Trauma-informed care models.
- Community-based and culturally sensitive interventions.
- Focus on resilience and preventative strategies.
- Benefits of early intervention.
- Agreed ways of working.
- Person-centred approach.
- Approaches to recovery:
  - empowerment of individuals
  - advocacy
  - self-management
  - recognition of individual rights
  - supporting individuals to adopt and maintain mentally healthy lifestyles.
- Addressing inequity.

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Assessment criteria

Learning aim A: Understand different views on the nature of mental wellbeing and mental health

Learning aim B: Examine how the main forms of mental ill health are classified

Pass	Merit	Distinction
A.P1 Explain factors that influence mental wellbeing and mental health.	**A.M1** Analyse factors that influence mental wellbeing and mental health with reference to a view on the nature of mental wellbeing and mental health.	**AB.D1** Evaluate the nature of mental health and wellbeing and the role of current classification systems in improving the diagnosis of selected mental ill-health conditions and their symptoms.
B.P2 Explain the impact of current classification systems on the diagnosis of mental ill-health conditions. **B.P3** Discuss the strengths and limitations of current classification systems in recognising selected mental ill-health conditions and their symptoms.	**B.M2** Analyse the contribution of current classification systems in the diagnosis of selected mental ill-health conditions and their symptoms.	

Learning aim C: Examine the impact of mental ill health on individuals and others in their social networks

Learning aim D: Examine strategies that promote mental wellbeing and mental health

Pass	Merit	Distinction
C.P4 Explain the impact of mental ill health on a selected individual. **C.P5** Explain how mental ill health affects a selected individual's relationships with others.	**C.M3** Analyse the impact of mental ill health on a selected individual's relationships within their social networks with reference to factors that may have caused it.	**CD.D2** Evaluate the importance of promoting, protecting and restoring the mental wellbeing and mental health of a selected individual diagnosed with a mental ill-health condition. **D.D3** Evaluate how accurate diagnosis of mental ill-health conditions lead to correct treatment.
D.P6 Explain strategies that can be applied to promote the mental wellbeing and mental health of a selected individual diagnosed with a mental ill health condition.	**D.M4** Justify strategies that can be applied to promote the mental wellbeing and mental health of a selected individual diagnosed with a mental ill health condition, making reference to relevant guidance, policies and codes of practice.	

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Transferable skills

Managing Yourself	Effective Learning	Interpersonal Skills	Solving Problems
MY – TPR	EL – MOL	IS – WC	SP – CT
MY – PS&R	EL – CL	IS – V&NC	SP – PS
MY – COP	EL – SRS	IS – T	SP – C&I
MY – PGS	EL – PRS	IS – C&SI	

Table key

*	Signposted to indicate opportunities for development as a part of wider teaching and learning
√	Embedded in teaching, learning and assessment
blank	Not embedded or signposted in unit

Essential information for assignments

The recommended structure of assessment is shown in the unit summary, along with suitable forms of evidence. The *Pearson BTEC International Level 3 Qualifications Supplementary Information* document gives information on setting assignments. There is also further information on our website.

There is a maximum number of two summative assignments for this unit.

The relationship of the learning aims and criteria is:

Learning aims: A and B (A.P1, B.P2, B.P3, A.M1, B.M2, AB.D1)

Learning aims: C and D (C.P4, C.P5, D.P6, C.M3, D.M4, CD.D2, D.D3)

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Further information for teachers and assessors

Resource requirements

For this unit, students must have access to any of the following:

- psychiatric nurse
- social worker who works with individuals diagnosed with a mental ill-health condition (if applicable)
- member of staff from a mental health foundation or another charity in the field of mental health.

Students must have access to relevant guidance relating to policy. Guidance must be up to date and applicable to their local country.

Essential information for assessment decisions

Learning aims A and B

For distinction standard, students will evaluate and reach reasoned and valid judgements on the ways in which mental wellbeing and mental health are understood. They must use research to justify the validity of factors put forward that affect mental wellbeing and mental health across the lifespan. Students must draw on knowledge and understanding, making suitable justifications on current classification systems, their strengths and limitations in improving the diagnosis of two different mental ill-health conditions and their symptoms.

For merit standard, students will make reasoned, analytical judgements involving comparison, discussion or justification of the ways in which mental wellbeing and mental health are understood. Students must use research to extend their understanding of factors that affect mental wellbeing and mental health across the lifespan. Students must interrelate facts, theories, concepts and contexts of current classification systems, their strengths and limitations in improving the diagnosis of two different mental ill-health conditions and their symptoms, drawing suitable conclusions.

For pass standard, students will recall and relate knowledge through understanding a range of appropriate contexts of ways in which mental wellbeing and mental health are understood. They must use research with relevance to given situations, including using numerical and graphical data sources on factors that affect mental wellbeing and mental health across the lifespan. Students must select and organise information using appropriate knowledge and concepts, making suitable judgements on current classification systems, their strengths and limitations in improving the diagnosis of two different mental ill-health conditions and their symptoms.

Learning aims C and D

For distinction standard, students will articulate arguments and views concisely and professionally to justify conclusions on the impact of mental ill health on a selected individual and their relationships with others in their social networks. They must show in-depth understanding of how the knowledge applies to detailed situations in relation to relevant sections of guidance, policies and practice relating to strategies for mental wellbeing and mental health promotion. Students must draw on knowledge and understanding of assessment and treatment strategies for the mental ill-health condition of the selected individual, making suitable justifications.

For merit standard, students will select and apply knowledge to demonstrate the impact of mental ill health on a selected individual and their relationships with others in their social networks. They must show that they understand how knowledge is applied to detailed situations, in relation to relevant sections of guidance, policies and practice relating to strategies for mental wellbeing and mental health promotion. Students must interrelate facts, theories, concepts and contexts of assessment and treatment strategies for the mental ill-health condition of the selected individual, drawing suitable conclusions.

For pass standard, students will recall and relate knowledge through understanding a range of appropriate contexts of the impact of mental ill health on a selected individual and their relationships with others in their social networks. They must explore well-defined applications of knowledge to demonstrate understanding of sections of guidance, policies and practice relating to strategies for mental wellbeing and mental health promotion. Students must select and organise information, using appropriate knowledge and concepts, about assessment and treatment strategies for the mental ill-health condition of the selected individual.

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Links to other units

This unit links to:

- Unit 4: Principles of Safe Practice in Health and Social Care
- Unit 9: Principles of Effective Care
- Unit 11: Supporting Individuals with Additional Needs
- Unit 14: Caring for Individuals with Dementia
- Unit 21: Complementary Therapies for Health and Social Care.

Unit 18: Genetics

Level: 3

Unit type: Internal

Guided learning hours: 60

Unit in brief

Students explore the scientific principles of human genetics and its influence on health and development, while examining how reproductive and gene technologies are shaped by regulations and ethical considerations.

Unit introduction

Genetics is a fundamental area of science that helps us understand how traits and characteristics are passed from one generation to the next. This unit explores the principles of inheritance, the structure and function of genes, and the role they play in human development and health. By studying genetics, you will gain insight into how biological factors influence physical and psychological growth.

The unit also examines the interaction between genetic factors and environmental influences, highlighting how both nature and nurture shape development before and after birth. You will investigate the impact of genetic disorders, as well as the technologies that support reproduction and improve life chances, while considering the ethical and regulative frameworks that govern these practices.

Completing this unit will prepare you for progression into higher education and a career in health and social care, particularly in a role that requires scientific understanding and analytical skills. It will also develop your transferable skills such as research, critical thinking and evaluation, which are essential for success in both academic and professional contexts.

Learning aims

In this unit you will:

A Understand genetics and its role in human inheritance from conception to birth

B Examine the factors affecting pre- and post-natal development

C Investigate how advances in science can contribute to understanding reproductive and gene technologies

D Examine how regulations and ethical challenges influence the use of reproductive and gene technologies.

Summary of unit

Learning aim	Key content areas	Assessment approach
A Understand genetics and its role in human inheritance from conception to birth	**A1** The role of genetics in human reproduction **A2** The way in which natural conception occurs and patterns of pre-natal growth	Students will present information, using a case study, on the role of genetics, the impact of factors affecting healthy pre-natal development, and how difficulties related to reproduction affect post-natal development and care needs through the life course.
B Examine the factors affecting pre- and post-natal development	**B1** Factors affecting pre-natal development **B2** Effects on post-natal development through life's course	
C Investigate how advances in science can contribute to understanding reproductive and gene technologies	**C1** Contribution of reproductive and gene technologies in advancing healthy life chances **C2** Impact of reproductive and gene technologies on individuals and society	Students will present information on the role of reproductive and gene technologies in promoting life chances and causing ethical challenges for a selected individual with a specific genetic disorder and society.
D Examine how regulations and ethical challenges influence the use of reproductive and gene technologies	**D1** Guidance and regulation governing reproductive and gene technologies **D2** Ethical challenges for those working with reproductive and gene technologies	

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Content

The essential content is set out under content areas. Students must cover all specified content before the assessment.

Learning aim A: Understand genetics and its role in human inheritance from conception to birth

A1 The role of genetics in human reproduction

- The meaning and terminology of genetics.
- Structure and composition of genes:
  - genetic terms: genome, genotype, phenotype, chromosomes, DNA, epigenetics (how environmental factors influence gene expression), CRISPR gene editing, polygenic risk scores for predicting health outcomes
  - principal structure and composition of the genetic code (DNA)
  - heredity: psychological traits such as cognitive abilities, bipolar, schizophrenia.

A2 The way in which natural conception occurs and patterns of pre-natal growth

- Genetic behaviour from conception and fertilisation to birth, including cell division and chromosomal behaviour, impact of assisted reproductive technologies (ART) such as IVF with genetic screening, emerging artificial womb research.
- Stages and significant chromosomal developments during foetal growth.

Learning aim B: Examine the factors affecting pre- and post-natal development

B1 Factors affecting pre-natal development

Positive and negative factors promoting foetal development.

- Genetic factors (nature):
  - parental genotype
  - genetic variation and effects, including genetic and chromosome disorders, colour vision deficiency.
- Environmental factors (nurture):
  - parental factors (e.g. age, diet, health)
  - pre-conception factors (e.g. drug misuse)
  - lifestyle and family functioning (e.g. poverty, one-parent family, domestic violence, abuse).
- Impact of digital health tools (wearables, apps for pregnancy monitoring), climate change effects on maternal health, mental health during pregnancy.

B2 Effects on post-natal development through life's course

- Effects on post-natal development and meeting care needs through life's course, resulting from effects of genetic and environmental factors, including positive and negative factors.

Learning aim C: Investigate how advances in science can contribute to understanding reproductive and gene technologies

C1 Contribution of reproductive and gene technologies in advancing healthy life chances

- Reproductive technologies:
  - screening techniques
  - assisted reproduction.
- Gene technologies:
  - recombinant DNA
  - Human Genome Project
  - gene therapy
  - genetic modification/enhancement, CRISPR-based therapies, stem cell applications, AI in genetic diagnostics, personalised medicine
  - autosomal dominant/recessive inheritance (e.g. eyes, kidneys).
- Technologies developed that improve life chances through study of genetics.

C2 Impact of reproductive and gene technologies on individuals and society

- Effects on individuals, including psychological wellbeing, quality of life, benefits versus risk.
- Effects on society, including values and beliefs, support systems, physical and financial resources, individual versus wider perspective.
- Data privacy concerns in genetic testing, genetic discrimination issues, global equity in access to gene technologies.

Learning aim D: Examine how regulations and ethical challenges influence the use of reproductive and gene technologies

D1 Guidance and regulation governing reproductive and gene technologies

Guidance and regulation must be current and applicable to local country.

- Regulation and guidance.
- Guidance and directives.
- International frameworks for gene editing ethics, emerging policies on AI-driven genetic analysis.

D2 Ethical challenges for those working with reproductive and gene technologies

- Risk versus benefits (e.g. surrogacy for money against genetic testing to avoid disease, designer babies, AI bias in genetic predictions, ethical implications of synthetic biology).
- Cost to society (e.g. risk of birth deficiencies).
- Pressure groups.
- Genetic misuse for improvement rather than health use.

Assessment criteria

Learning aim A: Understand genetics and its role in human inheritance from conception to birth

Learning aim B: Examine the factors affecting pre- and post-natal development

Pass	Merit	Distinction
A.P1 Explain how genetics affects the process of human reproduction from conception to birth.	**A.M1** Assess the role of genetics in the process of human reproduction from conception to birth.	**AB.D1** Evaluate the role of genetics, the impact of factors affecting healthy pre-natal development, and how difficulties related to reproduction affect post-natal development and care needs through the life course.
B.P2 Explain how different genetic and environmental factors can affect pre- and post-natal development. **B.P3** Explain how factors that affect healthy pre-natal development, leading to developmental delay or impairment of normal body functioning, influence post-natal development and care needs through the life course.	**B.M2** Assess how genetic and environmental factors, resulting in developmental delay or impairment of normal body functioning, impact on post-natal development and care needs through the life course.	

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Learning aim C: Investigate how advances in science can contribute to understanding reproductive and gene technologies

Learning aim D: Examine how regulations and ethical challenges influence the use of reproductive and gene technologies

Pass	Merit	Distinction
C.P4 Explain how reproductive and gene technologies can contribute to promoting life chances. **C.P5** Explain the effects that reproductive and gene technologies can have on a selected individual and society.	**C.M3** Analyse the impact of reproductive and gene technologies for a selected individual and society in relation to promoting life chances.	**CD.D2** Evaluate the role of reproductive and gene technologies in promoting life chances and causing ethical challenges for a selected individual with a specific genetic disorder and society. **D.D3** Evaluate the importance of the role of genetics in pre- and post-natal development, and the contribution of reproductive and gene technologies in promoting individuals' and society's life chances, referring to ethical challenges.
D.P6 Explain how reproductive and gene technologies can cause ethical challenges associated with a specific genetic disorder for a selected individual and society.	**D.M4** Analyse how a specific genetic disorder can affect the use of reproductive and gene technologies, and cause ethical challenges for a selected individual and society.	

Transferable skills

Managing Yourself	Effective Learning	Interpersonal Skills	Solving Problems
MY – TPR	EL – MOL	IS – WC	SP – CT
MY – PS&R	EL – CL	IS – V&NC	SP – PS
MY – COP	EL – SRS	IS – T	SP – C&I
MY – PGS	EL – PRS	IS – C&SI	

Table key

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The relationship of the learning aims and criteria is:

Learning aims: A and B (A.P1, B.P2, B.P3, A.M1, B.M2, AB.D1)

Learning aims: C and D (C.P4, C.P5, D.P6, C.M3, D.M4, CD.D2, D.D3)

Further information for teachers and assessors

Resource requirements

For this unit, students must have access to relevant guidance and regulations relating to policy.

Essential information for assessment decisions

Learning aims A and B

For distinction standard, students will evaluate and reach reasoned and valid judgements on the role of genetics in human reproduction. They must show how knowledge applies to situations in relation to how natural conception occurs and patterns of pre-natal growth. Students must draw on knowledge and understanding of factors affecting pre-natal development and effects on post-natal development through the life course, making suitable justifications.

For merit standard, students will select and apply knowledge to demonstrate the relevance and purpose of the role of genetics in human reproduction. They must show that they understand how knowledge is applied, and patterns of pre-natal growth. Students must interrelate facts, concepts and contexts, drawing suitable conclusions about factors affecting pre-natal development and the effects on post-natal development through life's course.

For pass standard, students will recall and relate knowledge through understanding a range of appropriate concepts and contexts of the role of genetics in human reproduction. They must explore well-defined applications of knowledge to demonstrate an understanding of the way in which natural conception occurs and the patterns of pre-natal growth. Students must select and organise information using appropriate knowledge and concepts, making suitable judgements on factors affecting pre-natal development and effects on post-natal development through life's course.

Learning aims C and D

For distinction standard, students will show in-depth understanding of how knowledge applies to detailed situations on the contribution of reproductive and gene technologies in advancing healthy life chances. They must use research to justify the validity of guidance and regulation governing reproductive and gene technologies, and the impact of the latter on a selected individual with a specific genetic disorder and society. Students must draw knowledge and understanding on ethical challenges for those working with reproductive and gene technologies, making suitable justifications.

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For merit standard, students will show that they understand how knowledge is applied to less familiar situations in relation to the contribution of reproductive and gene technologies in advancing healthy life chances. They must use research to extend their understanding to less familiar contexts of guidance and regulation governing reproductive and gene technologies, and the impact of the latter on society and a selected individual with a specific genetic disorder. Students must interrelate facts, concepts and contexts, drawing suitable conclusions on ethical challenges for those working with reproductive and gene technologies.

For pass standard, students will explore well-defined applications of knowledge to demonstrate understanding of the contribution of reproductive and gene technologies in advancing healthy life chances. Students must use research with relevance to given situations, including using data sources on guidance and regulation governing reproductive and gene technologies, and the impact of the latter on society and a selected individual with a specific genetic disorder. Students must select and organise information using appropriate knowledge and concepts, making suitable judgements on ethical challenges for those working with reproductive and gene technologies.

Links to other units

This unit links to:

- Unit 12: Microbiology for Health Science
- Unit 19: Biomedical Science
- Unit 20: Biochemistry for Health.

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Unit 19: Biomedical Science

Level: 3

Unit type: Internal

Guided learning hours: 60

Unit in brief

Students will explore the essential role of biomedical science in diagnosing and monitoring health conditions, exploring blood science, cell pathology and biochemistry.

Unit introduction

Biomedical science plays a critical role in modern healthcare, underpinning accurate diagnosis and effective treatment of diseases. From identifying infections to monitoring chronic conditions, biomedical scientists provide essential evidence that informs clinical decisions and improves patient outcomes. This unit introduces you to the principles and practices that make biomedical science a cornerstone of health systems worldwide.

You will explore the science behind blood transfusion, and the diagnostic value of cell pathology and biochemical analysis. You will gain insight into the technologies and processes used in laboratories, as well as the ethical and safety considerations that guide biomedical practice in a rapidly evolving healthcare landscape.

Progression from this unit opens pathways to advanced study and careers in biomedical science, healthcare and related fields. You will develop transferable skills in research, analysis and problem solving, preparing you for higher education or roles in clinical laboratories, pharmaceutical industries and emerging areas such as biotechnology and personalised medicine.

Learning aims

In this unit you will:

A Examine the principles of blood transfusion science and its importance to those working in haematology

B Investigate the importance of cell pathology as a diagnostic tool

C Explore how the chemical make-up of the body influences health and disease.

Summary of unit

Learning aim	Key content areas	Assessment approach
A Examine the principles of blood transfusion science and its importance to those working in haematology	**A1** Blood components **A2** Diseases/problems associated with blood components **A3** The diagnostic techniques used in haematology **A4** Blood transfusion **A5** Infections transmissible by blood transfusion	Students will present information on the principles of blood transfusion science and the diagnostic techniques used in haematology.
B Investigate the importance of cell pathology as a diagnostic tool	**B1** Processes involved in cell pathology **B2** Cell collection procedures for analysis	Students will present information, based on individual research, on how biochemical and pathology tests are used to identify and measure diseases in the human body.
C Explore how the chemical make-up of the body influences health and disease	**C1** Biochemistry systems **C2** Biochemical testing and monitoring	

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Content

The essential content is set out under content areas. Students must cover all specified content before the assessment.

Learning aim A: Examine the principles of blood transfusion science and its importance to those working in haematology

A1 Blood components

- Structure and function of the components of blood: red blood cells, white blood cells, plasma, platelets.
- Production of blood products, to include serum, stem cell-derived blood products, synthetic blood substitutes.

A2 Diseases/problems associated with blood components

- Erythrocytic diseases, to include types of anaemia, thalassaemia, vitamin B12 and folate deficiency, sickle cell anaemia.
- White blood cell diseases, to include lymphocytosis, AIDS, infectious mononucleosis.
- Blood cancers: leukaemia; lymphomas, to include Hodgkin's, non-Hodgkin's diseases.
- Haemostasis and thrombosis.
- Genetic screening for predispositions.

A3 The diagnostic techniques used in haematology

- Blood smears, blood cells counts including mean corpuscular and blood volumes, iron analysis and haemoglobin tests, next-gen nucleic acid testing (NAT) and genomic sequencing, urine testing.

A4 Blood transfusion

- Red cell compatibility and coagulation tests.
- Blood supply-chain security, personalised transfusion protocols.
- Clinical use of blood products, to include surgery, intensive care.
- Treatment of inherited conditions, to include haemophilia, sickle cell anaemia, thalassemia; haemolytic diseases in newborn babies.

A5 Infections transmissible by blood transfusion

- Screening of blood products for diseases, to include hepatitis, human parvovirus, malaria, Chagas disease, cytomegalovirus, HIV.
- Emerging pathogens (e.g. Zika, SARS-CoV-2).

Learning aim B: Investigate the importance of cell pathology as a diagnostic tool

B1 Processes involved in cell pathology

- Causes of cell pathology, to include cell ageing; neoplasia.

B2 Cell collection procedures for analysis

- How samples are used and investigated to diagnose diseases.
- Surgical removal of tissues, pap smear, removal of surface cells; aspiration, liquid biopsy (for cancer cells).
- Minimally invasive sampling, wearable biosensors for continuous monitoring.

Learning aim C: Explore how the chemical make-up of the body influences health and disease

C1 Biochemistry systems

- The role of hormones and enzymes in the body.
- Control systems, to include endocrinology, water and electrolytic metabolism, the control of calcium, carbohydrate and protein levels.
- Metabolic problems, to include acid-base balance, blood gases, kidney and liver functions.
- The study of metabolites and proteins in the body (metabolomics and proteomics), impact of personalised nutrition and microbiome on biochemistry.

C2 Biochemical testing and monitoring

- Liver and kidney functions.
- Endocrinology, to include hormone levels, diagnosis of endocrine disorders.
- Fluid analysis, to include urine, central spinal fluid (CSF).
- Faecal analysis, to include gastrointestinal disorders.
- Toxicology, to include therapeutic drug monitoring.
- Real-time monitoring using biosensors, omics-based diagnostics.

Assessment criteria

Learning aim A: Examine the principles of blood transfusion science and its importance to those working in haematology

Pass	Merit	Distinction
A.P1 Describe the components of human blood and the clinical use of blood products. **A.P2** Describe three diseases of different blood components. **A.P3** Describe four diagnostic techniques used in haematology. **A.P4** Describe the screening procedures involved in preventing the transmission of blood-borne infections.	**A.M1** Discuss the clinical uses of blood products and the reasons for screening them before use. **A.M2** Analyse the screening procedures involved in preventing the transmission of blood-borne infections.	**A.D1** Evaluate the clinical use of blood products and the screening procedures involved in preventing the transmission of blood-borne infections.

Learning aim B: Investigate the importance of cell pathology as a diagnostic tool

Learning aim C: Explore how the chemical make-up of the body influences health and disease

Pass	Merit	Distinction
B.P5 Explain the causes of cell injury.	**B.M3** Analyse how cell pathology is used in disease identification.	**BC.D2** Evaluate the effectiveness of cell pathology used in conjunction with biochemical investigations as a diagnostic tool.
C.P6 Describe two of the biochemical systems found in the human body. **C.P7** Describe how two biochemical tests are used to monitor the biochemistry of the human body.	**C.M4** Assess how biochemical tests are used to monitor the human body.	

Transferable skills

Managing Yourself	Effective Learning	Interpersonal Skills	Solving Problems
MY – TPR	EL – MOL	IS – WC	SP – CT
MY – PS&R	EL – CL	IS – V&NC	SP – PS
MY – COP	EL – SRS	IS – T	SP – C&I
MY – PGS	EL – PRS	IS – C&SI	

Table key

*	Signposted to indicate opportunities for development as a part of wider teaching and learning
√	Embedded in teaching, learning and assessment
blank	Not embedded or signposted in unit

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Essential information for assignments

The recommended structure of assessment is shown in the unit summary, along with suitable forms of evidence. The *Pearson BTEC International Level 3 Qualifications Supplementary Information* document gives information on setting assignments. There is also further information on our website.

There is a maximum number of two summative assignments for this unit.

The relationship of the learning aims and criteria is:

Learning aim: A (A.P1, A.P2, A.P3, A.P4, A.M1, A.M2, A.D1)

Learning aims: B and C (B.P5, C.P6, C.P7, B.M3, C.M4, BC.D2)

Further information for teachers and assessors

Resource requirements

For this unit, students will need access to research facilities such as the internet.

Where possible, they should have a work experience placement or have access to relevant laboratories that deal with processing biological samples. Visits to the centre by laboratory personnel will help students with understanding how such laboratories work. Although they may not be directly working in such laboratories, students do need to understand how they fit into their role as health workers, so as much experience as possible of health-related laboratory work will be an advantage in this unit.

Essential information for assessment decisions

Learning aim A

For distinction standard, students must show why blood tests are often the first line of investigation when a patient presents with something abnormal. Similarly, they must justify why the blood transfusion process is prominent in treatment. Students must include the processes involved in getting blood to the stage where it is suitable for transfusion. Students must articulate their reasoning to reach justified conclusions.

For merit standard, students must explain the clinical uses of blood products, including the components that are used and when, for example surgery and long-term control of clinical conditions. They should include the reasons for blood screening and the effectiveness of the screening process.

For pass standard, students must include the structure and function of blood components. Students must link blood components with named infectious diseases. In describing the diagnostic techniques used in haematology, they will cover four specific diagnostic tests, including what is being tested for. Students will explain screening processes and link the screening to named diseases.

Learning aims B and C

For distinction standard, students link investigations of cells used alongside biochemical tests to show how these can provide an effective diagnostic tool. They must use specific examples. Students will evaluate effectiveness of cell pathology and biochemical tests when diagnosing diseases, making suitable justifications.

For merit standard, students will show how cell pathology uses cell injury to diagnose diseases. They will explain the use of at least two biochemical tests to monitor different disorders.

For pass standard, students will include the causes of cell injury. Students will choose two named biochemical systems and describe them, including their role in homeostatic control. Students must explain how two biochemical tests are used to monitor what is happening in the body. Details of the equipment are not required.

Links to other units

This unit links to:

- Unit 2: Anatomy and Physiology for Health and Social Care
- Unit 10: Physiological Disorders and their Care
- Unit 12: Microbiology for Health Science
- Unit 20: Biochemistry for Health.

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Unit 20: Biochemistry for Health

Level: 3

Unit type: Internal

Guided learning hours: 60

Unit in brief

Students explore the structure and function of biological molecules, their role in metabolism, and how biochemical principles are applied in health research.

Unit introduction

Biochemistry is the study of the chemical processes and substances that occur within living organisms. This unit introduces you to the molecular building blocks of life, including proteins, carbohydrates, lipids and nucleic acids, and explores how their structure influences their function in biological systems. You will investigate how these molecules interact in metabolic pathways and how biochemical reactions underpin health and disease.

The unit also examines the role of enzymes, DNA and other biomolecules in industrial and clinical contexts. You will explore how biochemistry is applied in areas such as biotechnology, diagnostics and pharmaceutical development. Through practical investigations and case studies, you will gain insight into how biochemical knowledge is used to solve real-world problems and improve human health.

This unit provides a strong foundation for progression into higher education or employment in health science, biomedical research or biotechnology. You will develop analytical and investigative skills that are essential for careers in laboratory science, clinical diagnostics and pharmaceutical development, while also preparing for further study in biochemistry, molecular biology or related disciplines.

Learning aims

In this unit you will:

A Explore how the structure of biological molecules affects metabolism

B Explore the action of biomolecules in metabolic processes

C Examine the role of biochemical research in investigating the causes and treatment of metabolic disorders.

Summary of unit

Learning aim	Key content areas	Assessment approach
A Explore how the structure of biological molecules affects metabolism	**A1** Structure of atoms and molecules **A2** Structure and function of inorganic molecules **A3** Structure and function of organic molecules **A4** Principles of metabolism	Students will present information on the structure of atoms, the structure, function and role of inorganic and organic molecules, and the principles of metabolism.
B Explore the action of biomolecules in metabolic processes	**B1** Structure and functions of proteins **B2** Structure and functions of carbohydrates and lipids **B3** Structure and functions of nucleic acids	Students will present information on how the structure, functions and action of biomolecules affect metabolic rates.
C Examine the role of biochemical research in investigating the causes and treatment of metabolic disorders	**C1** Research methodology in biochemistry **C2** The causes and treatments of metabolic disorders	Students will present information on metabolic disorders and diseases, and how biotechnology is used in current medical research to develop techniques and technology for treating metabolic disorders.

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Content

The essential content is set out under content areas. Students must cover all specified content before the assessment.

Learning aim A: Explore how the structure of biological molecules affects metabolism

A1 Structure of atoms and molecules

- Structure of atoms: neutrons, protons, electrons.
- Electronic configuration: carbon, hydrogen, nitrogen, oxygen.
- Covalent bonds: carbon dioxide, water.
- Ionic bonds: sodium chloride, hydrochloric acid.
- Nature of bonds in biological molecules, isomerism.

A2 Structure and function of inorganic molecules

- Water: universal solvent, hydrogen bonding effect on melting point and boiling point, ionisation, polarity, in buffers.
- Ions in biological systems, including ion concentration across cell membrane and electron transport.
- Nanomaterials and their biochemical interactions (e.g. nanoparticles in drug delivery).

A3 Structure and function of organic molecules

- Proteins, including 20 amino acids, amine bonds; hydrolysis of proteins.
- Lipids, including fatty acids, glycerol, triglycerides, phospholipids; hydrolysis of lipids.
- Carbohydrates, including monosaccharides, isomers of glucose, fructose, disaccharides, sucrose, lactose, polysaccharides, starch, glycogen, condensation of alpha glucose; hydrolysis of carbohydrates.

A4 Principles of metabolism

- Basic concepts of metabolism: anabolism, catabolism.
- Metabolic pathways: aerobic respiration, to include glycolysis, Krebs cycle, ATP generation; anaerobic respiration; sodium-potassium pump.

Learning aim B: Explore the action of biomolecules in metabolic processes

B1 Structure and functions of proteins

- Enzymes:
  - salivary amylase, pepsin, lipase; enzyme action, active site specificity; co-enzymes, co-factors, inhibitor
  - factors affecting enzyme action: specificity, concentrations, temperature, pH.
- Haemoglobin: including oxygenation of the transport protein.
- Membrane proteins: receptors, channels, pumps.
- Hormones: insulin, testosterone, cholesterol, aldosterone.

B2 Structure and functions of carbohydrates and lipids

- Glucose metabolism, cellular respiration.
- Membrane structure, energy storage.

B3 Structure and function of nucleic acids

- DNA and RNA, role in protein synthesis.
- Cell replication.
- Investigation: DNA extraction and electrophoresis.
- DNA sequencing.
- Epigenetics, RNA-based therapies, CRISPR-Cas9 gene editing.

Learning aim C: Examine the role of biochemical research in investigating the causes and treatment of metabolic disorders

C1 Research methodology in biochemistry

- Principles of the scientific methodology.
- Factors affecting scientific research and investigation, health and safety considerations.
- Communicating investigative outcomes using scientific reports.
- Digital lab notebooks, AI-assisted data analysis, bioinformatics.

C2 The causes and treatments of metabolic disorders

- Disorders of the endocrine system: type 1 and type 2 diabetes mellitus, parathyroidism.
- Disorders caused by genetic defects: glycogen storage disease, phenylketonuria.
- Disorders caused by microbiome imbalance (dysbiosis): metabolic syndrome, inflammatory bowel disease, irritable bowel syndrome.

Assessment criteria

Learning aim A: Explore how the structure of biological molecules affects metabolism

Pass	Merit	Distinction
A.P1 Describe the structure and configuration of atoms. **A.P2** Describe the structures of organic and inorganic biological molecules. **A.P3** Describe the role of three organic and two inorganic molecules in metabolism.	**A.M1** Assess how the structure of three organic and two inorganic molecules affects their function and role in metabolism.	**A.D1** Evaluate the structure, function and role of inorganic and organic molecules, and their role in metabolism.

Learning aim B: Explore the action of biomolecules in metabolic processes

Pass	Merit	Distinction
B.P4 Describe how the structure of biomolecules affects their roles in metabolic processes. **B.P5** Explain how different factors affect enzyme activity.	**B.M2** Analyse how the structure of biomolecules affects their roles in metabolic processes. **B.M3** Assess the impact of factors affecting enzyme activity on metabolic rates.	**B.D2** Evaluate how the structure, functions and action of biomolecules affect metabolic processes, and how different factors that affect enzyme activity impact on metabolic rates.

Learning aim C: Examine the role of biochemical research in investigating the causes and treatment of metabolic disorders

Pass	Merit	Distinction
C.P6 Describe how biochemical investigations into metabolic disorders are carried out. **C.P7** Explain the causes and treatments of three metabolic disorders.	**C.M4** Assess the impact of research into biochemical processes on the treatment of metabolic disorders.	**C.D3** Evaluate how research into biochemical processes and their role in metabolism affects the treatment of metabolic disorders.

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Transferable skills

Managing Yourself	Effective Learning	Interpersonal Skills	Solving Problems
MY – TPR	EL – MOL	IS – WC	SP – CT
MY – PS&R	EL – CL	IS – V&NC	SP – PS
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Table key

*	Signposted to indicate opportunities for development as a part of wider teaching and learning
√	Embedded in teaching, learning and assessment
blank	Not embedded or signposted in unit

Essential information for assignments

The recommended structure of assessment is shown in the unit summary, along with suitable forms of evidence. The *Pearson BTEC International Level 3 Qualifications Supplementary Information* document gives information on setting assignments. There is also further information on our website.

There is a maximum number of three summative assignments for this unit.

The relationship of the learning aims and criteria is:

Learning aim: A (A.P1, A.P2, A.P3, A.M1, A.D1)

Learning aim: B (B.P4, B.P5, B.M2, B.M3, B.D2)

Learning aim: C (C.P6, C.P7, C.M4, C.D3)

Further information for teachers and assessors

Resource requirements

There are no specific resources required for this unit.

Essential information for assessment decisions

Learning aim A

For distinction standard, students will show understanding of how the structure of three organic and two inorganic molecules affects their function and role in metabolism. Students must refer to the specific structures of the molecules and types of bonding. They are expected to include diagrams of relevant atoms and explain the production of bond types and molecules, linking them to their roles.

For merit standard, students will assess the structure of three organic and two inorganic molecules, and assess how this affects their function and role in metabolism. Students link their roles to the specific structures of the molecules, including the types of bonds. They are expected to include diagrams of relevant atoms and explain the production of bond types and molecules.

For pass standard, students will describe the structure, and role in metabolism, of three organic and two inorganic molecules. Students must refer to the specific structures of the molecules, including the types of bonds. They are expected to include diagrams of atoms and explain the production of bond types and molecules. They will include at least carbon, hydrogen, nitrogen and oxygen.

Learning aim B

For distinction standard, students will show understanding of how the structure, function and action of biomolecules affect metabolism. They will include examples of the roles of proteins, carbohydrates, lipids and nucleic acids in metabolism.

For merit standard, students will include an analysis of how the structure, function and action of biomolecules affect metabolism, including examples of the roles of proteins, carbohydrates, lipids and nucleic acids, and assess the impact of factors affecting enzyme activity on metabolic processes and metabolic rates.

For pass standard, students will describe the role of proteins, carbohydrates, lipids and nucleic acids, and how their structures affect their roles. They will investigate the factors affecting enzyme activity.

Learning aim C

For distinction standard, students will evaluate how research into three metabolic disorders, caused by endocrine, genetic and microbiome factors, is affecting treatment of those disorders. Students must link the way that research is carried out to how effective it is at improving treatments.

For merit standard, students will review how research influences the treatment of three metabolic disorders caused by endocrine, genetic and microbiome factors. Students will include an assessment of the effectiveness of scientific methodology.

For pass standard, students will describe how biochemical investigations are carried out into three metabolic disorders caused by endocrine, genetic and microbiome factors. Students will include an explanation of the causes and treatment of the three disorders, and a description of how research is carried out.

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Links to other units

This unit links to:

- Unit 12: Microbiology for Health Science
- Unit 16: Nutritional Health
- Unit 18: Genetics
- Unit 19: Biomedical Science.

Unit 21: Complementary Therapies for Health and Social Care

Level: 3

Unit type: Internal

Guided learning hours: 60

Unit in brief

Students explore a range of complementary therapies and their potential benefits for health and wellbeing alongside conventional medical treatments. Students develop an understanding of how these therapies are provided, regulated and integrated into holistic care.

Unit introduction

Complementary therapies are recognised as valuable additions to conventional healthcare, offering holistic approaches that support physical, emotional and mental wellbeing. This unit introduces you to a range of therapies such as acupuncture, reflexology and aromatherapy, exploring their principles, benefits and applications in health and social care settings.

In this unit, you will examine how complementary therapies are provided, regulated and integrated alongside conventional treatments. You will consider factors such as safety, evidence-based practice and cultural influences, while developing an understanding of the ethical and professional responsibilities involved in delivering these therapies.

This unit supports progression into higher education and employment in health and social care, particularly in roles that value holistic and person-centred approaches. It also provides a foundation for further study in areas such as complementary medicine, physiotherapy, nursing and wellbeing services, equipping you with transferable skills in research, communication and critical analysis.

Learning aims

In this unit you will:

A Explore the potential benefits of complementary therapies in maintaining health and wellbeing

B Examine the provision of complementary therapies in relation to conventional medical treatments

C Investigate the factors to be considered when providing complementary therapies alongside conventional medical treatments.

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Summary of unit

Learning aim	Key content areas	Assessment approach
A Explore the potential benefits of complementary therapies in maintaining health and wellbeing	**A1** Types of complementary therapies **A2** Role of complementary therapies **A3** Benefits of complementary therapies	Students will present information on complementary therapies and their types, roles and benefits.
B Examine the provision of complementary therapies in relation to conventional medical treatments	**B1** Provision of complementary therapies **B2** Provision in relation to conventional medical treatment	Students will present information on the provision and role of complementary therapies.
C Investigate the factors to be considered when providing complementary therapies alongside conventional medical treatments	**C1** Role of professional bodies and regulation **C2** Factors to be considered when providing complementary therapies	

Content

The essential content is set out under content areas. Students must cover all specified content before the assessment.

Learning aim A: Explore the potential benefits of complementary therapies in maintaining health and wellbeing

A1 Types of complementary therapies

- Manipulative techniques (e.g. Alexander technique, chiropractic).
- Touch and massage techniques (e.g. Bowen technique, reflexology).
- Natural remedies (e.g. homeopathy, herbal medicine).
- Holistic therapies (e.g. Reiki, yoga therapy).
- Specific therapies (e.g. acupuncture, aromatherapy).
- Digital and tech-integrated therapies (e.g. virtual reality meditation).
- Emerging approaches (e.g. nutritional genomics, functional medicine).

A2 Role of complementary therapies

- Diagnostic.
- Therapeutic.
- Provision alongside conventional treatment.

A3 Benefits of complementary therapies

- Increased energy and wellbeing.
- Balance of mind, body and spirit.
- Pain management.
- Boost immune system and promote healing.
- Decrease stress and help relaxation.
- Help in the treatment of anxiety, depression, addiction, phobias.
- Improved circulation and digestion.
- Relief of side effects of chemotherapy in the treatment of cancer.
- Mental health resilience.
- Support for long COVID symptoms.

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Learning aim B: Examine the provision of complementary therapies in relation to conventional medical treatments

B1 Provision of complementary therapies

- Private and local provisions (e.g. telehealth).
- Access and referral systems.
- Global access disparities.
- Digital literacy.
- Choice for individuals, including conventional and complementary therapies.
- Factors affecting provision (e.g. availability, geographical, economic, cultural, public education, attitudes) and understanding of complementary therapies.

B2 Provision in relation to conventional medical treatment

- Provision of complementary therapies in relation to conventional treatment for the following disorders:
  - musculoskeletal disorders, including bones, joints, muscles, mobility, pain (e.g. acupuncture, Alexander technique)
  - metabolic disorders, including digestive disorders, endocrine function, immune system disorders, reproductive function (e.g. herbal medicine)
  - cardiorespiratory disorders, including pulmonary and cardiovascular functioning (e.g. Reiki)
  - psychological disorders, including stress, anxiety, depression (e.g. aromatherapy massage, meditation, visualisation)
  - cancer, including the side effects of chemotherapy (e.g. herbal medicine, acupuncture, massage)
  - labour and pain relief in childbirth (e.g. aromatherapy, reflexology)
  - post-pandemic conditions (e.g. long COVID)
  - neurodivergent conditions (e.g. ADHD, autism).

Learning aim C: Investigate the factors to be considered when providing complementary therapies alongside conventional medical treatments

C1 Role of professional bodies and regulation

- Role of professional organisations, including Independent Professional Therapists International (IPTI), Institute for Complementary and Natural Medicine (ICNM), International Guild of Complementary Therapists (IGCT), International Practitioners of Holistic Medicine (IPHM).
- Digital health regulatory bodies, cybersecurity standards for health data.
- Global health organisations (e.g. WHO for integrative health guidelines).
- Regulation and professional training, including legislation, registration, codes of ethics.

(Regulations and legislation must be current and applicable to local countries.)

C2 Factors to be considered when providing complementary therapies

- Research-based evidence, including clinical studies and trials.
- Advantages and disadvantages of complementary therapies.
- Contraindications for the use of complementary therapies.
- Controversial issues, including health and safety, unregistered practitioners.
- Data privacy, digital consent, sustainability of therapy practices.

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Assessment criteria

Learning aim A: Explore the potential benefits of complementary therapies in maintaining health and wellbeing

Pass	Merit	Distinction
A.P1 Explain the potential benefits of two different complementary therapies for individuals with different needs.	**A.M1** Assess how complementary therapies can maintain health and wellbeing for individuals with different needs.	**A.D1** Justify the contribution of complementary therapies in maintaining health and wellbeing for individuals with different needs.

Learning aim B: Examine the provision of complementary therapies in relation to conventional medical treatments

Learning aim C: Investigate the factors to be considered when providing complementary therapies alongside conventional medical treatments

Pass	Merit	Distinction
B.P2 Explain how individuals can access complementary therapies, with reference to factors affecting provision. **B.P3** Explain the provision of complementary therapies in relation to conventional medical treatment of two different disorders.	**B.M2** Analyse the reasons why complementary therapies may be offered in addition to conventional medical treatment.	**BC.D2** Evaluate the provision and effectiveness of complementary therapies in relation to conventional medical treatments in the health and social care sector.
C.P4 Explain the role of professional organisations in supporting the provision of complementary therapies. **C.P5** Explain factors to be considered when providing complementary therapies.	**C.M3** Analyse the importance of regulation in the provision of complementary therapies. **C.M4** Assess the importance of different factors when providing complementary therapies in the health and social care sector.	

Transferable skills

Managing Yourself	Effective Learning	Interpersonal Skills	Solving Problems
MY – TPR	EL – MOL	IS – WC	SP – CT
MY – PS&R	EL – CL	IS – V&NC	SP – PS
MY – COP	EL – SRS	IS – T	SP – C&I
MY – PGS	EL – PRS	IS – C&SI	

Table key

*	Signposted to indicate opportunities for development as a part of wider teaching and learning
√	Embedded in teaching, learning and assessment
blank	Not embedded or signposted in unit

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Essential information for assignments

The recommended structure of assessment is shown in the unit summary, along with suitable forms of evidence. The *Pearson BTEC International Level 3 Qualifications Supplementary Information* document gives information on setting assignments. There is also further information on our website.

There is a maximum number of two summative assignments for this unit.

The relationship of the learning aims and criteria is:

Learning aim: A (A.P1, A.M1, A.D1)

Learning aims: B and C (B.P2, B.P3, C.P4, C.P5, B.M2, C.M3, C.M4, BC.D2)

Further information for teachers and assessors

Resource requirements

For this unit, students should have access to relevant international or local legislation and professional codes of practice relating to the provision of complementary therapies.

Essential information for assessment decisions

Learning aim A

For distinction standard, students will articulate arguments professionally and concisely. They must use detailed analysis and research to address the importance and relevance of complementary therapies. Their work should take a holistic approach when considering the benefits of the therapies, for example in alleviating a disorder and aiding relaxation. Students will give reasons to support their views and use research to justify the validity of their conclusions.

For merit standard, students will use research to extend their understanding. They must select and apply knowledge to include a careful consideration of different ways the complementary therapies maintain health and wellbeing, such as increased energy, pain management or reducing stress and helping relaxation. Students must make reasoned, analytical judgements.

For pass standard, students will include clear details about each different therapy and reasons why it may be beneficial for each individual. For example, students could explain the benefits of the Alexander technique to improve mobility for an individual with arthritis. Their research must be relevant and organised to reach suitable judgements.

Learning aims B and C

For distinction standard, students will draw together their knowledge and understanding from across the whole unit. Students must consider the position of complementary therapies within the sector, and use detailed analysis and research to reach justified and supported judgements with a conclusion.

Students will evaluate the provision of complementary therapies, reaching reasoned and valid judgements. Students must include a consideration of the strengths and weaknesses, advantages and disadvantages, relevance or significance of complementary therapies, and any relevant issues when provided alongside conventional medical treatments, with appropriate examples. Students must show that they have used research to justify the validity of their recommendations and proposals.

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For merit standard, students will use research to extend their understanding to less familiar contexts. They must apply their knowledge to complex situations by including a detailed examination of evidence to support the recommendation of complementary therapies for individuals. For example, they could consider the use of acupuncture to treat osteoarthritis alongside conventional painkilling medication and an exercise plan. It is important to note that these practices may differ in different countries and, therefore, there may be other appropriate therapies that support different cultural needs.

Students will consider the lack of scientific evidence to support some complementary therapies. They must record information from relevant sources to provide a detailed analysis supporting the significance of regulation of complementary therapies in own local and regional communities, with appropriate examples.

They must select and apply relevant knowledge to include careful consideration of various factors, for example concerns about clinical effectiveness, safety, fears about professional regulation, or issues relating to cost-effectiveness and provision within own local and regional communities. Students must make reasoned, analytical judgements involving comparison or justification, and interrelate facts, theories and concepts to draw suitable conclusions.

For pass standard, students will recall and relate knowledge to include clear details about referral systems and choices available through private provision and/or own local and regional communities, with appropriate examples. Students must refer to the factors that might affect access, for example individuals may not be able to afford a particular complementary treatment if there is no local health provision.

Students will explain how complementary therapies are used alongside conventional treatment of different disorders in own local and/or regional communities. For example, using Reiki and psychotherapy for anxiety and stress-related disorders, or acupuncture and traditional drug treatment for the management of chronic pain.

Students will consider factors such as practitioner regulation, registration, codes of ethics and professional qualifications and training when explaining the role of professional organisations within own local and/or regional communities.

They must relate their understanding to health and social care organisational values, purpose and objectives, and identify the professional responsibilities of those providing complementary therapies.

Students will include details about different therapies with clear reasons to support why certain factors should be considered before providing complementary therapies. For example, they could explain how complementary therapies should not be provided to individuals who are taking prescription medication, those with existing medical conditions such as diabetes or high blood pressure, or during pregnancy.

Links to other units

This unit links to:

- Unit 2: Anatomy and Physiology for Health and Social Care
- Unit 4: Principles of Safe Practice in Health and Social Care
- Unit 10: Physiological Disorders and their Care.

This unit may be taught alongside:

- Unit 5: Enquiries into Current Research in Health and Social Care
- Unit 6: Psychological Perspectives
- Unit 9: Principles of Effective Care
- Unit 17: Understanding Mental Wellbeing
- Unit 22: Health Psychology.

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Unit 22: Health Psychology

Level: 3

Unit type: Internal

Guided learning hours: 60

Unit in brief

Students explore psychological factors that influence health, illness and wellbeing, including stress, pain, and health-related behaviours. Students will also apply psychological theories to contemporary health issues.

Unit introduction

Health psychology explores the intricate relationship between the mind and the body, i.e. psychological processes and physical health. It examines how beliefs, behaviours and social factors influence health outcomes, and how psychological theories can be used to promote wellbeing and manage illness.

This unit introduces you to key models of health, the impact of stress, and the psychological dimensions of pain and coping. Health challenges are evolving in the modern world, so this unit also considers contemporary issues such as digital health behaviours, the psychological impact of social media, and the role of technology in managing stress and chronic conditions. You will investigate how psychological approaches are used to address addiction, eating behaviours, exercise and reproductive health, with a focus on real-world applications.

This unit provides a strong foundation for progression into higher education or careers in health and social care, psychology or public health. You will develop transferable skills in research, analysis and communication, preparing you for further study or roles where understanding human behaviour and promoting health are essential.

Learning aims

In this unit you will:

A Understand how influences and beliefs regarding health and ill health impact the development of health psychology as a discipline

B Examine how psychology contributes to the management of contemporary issues in health

C Investigate models of stress and related strategies for managing stress

D Explore the role of psychology in dealing with pain and ill health.

Summary of unit

Learning aim	Key content areas	Assessment approach
A Understand how influences and beliefs regarding health and ill health impact the development of health psychology as a discipline	**A1** Concepts of health psychology, health and ill health **A2** Influences on beliefs and behaviours towards health and ill health	Students will present information on the role of health psychology, health and ill health concepts in the management of contemporary issues in health.
B Examine how psychology contributes to the management of contemporary issues in health	**B1** Contemporary issues in health **B2** Health psychology in relation to contemporary issues	
C Investigate models of stress and related strategies for managing stress	**C1** Development of stress models **C2** Stress management strategies	Students will present information on the use of strategies and psychological theories in managing stress, pain and ill health for a selected individual.
D Explore the role of psychology in dealing with pain and ill health	**D1** Concepts of pain and ill health **D2** Psychological theories related to pain and ill health	

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Content

The essential content is set out under content areas. Students must cover all specified content before the assessment.

Learning aim A: Understand how influences and beliefs regarding health and ill health impact the development of health psychology as a discipline

A1 Concepts of health psychology, health and ill health

- Definitions of health psychology, health and ill health (e.g. World Health Organization (WHO)).
- Models of health, including medical model, biopsychosocial model.
- Use of holistic concept of health in underpinning complementary treatments (e.g. acupuncture).
- Health-related behaviours, including health-belief model, compliance and non-compliance.
- The 'sick role'.
- The development of health psychology as a discipline.

A2 Influences on beliefs and behaviours towards health and ill health

- Cultural, including differing attitudes among different ethnic groups.
- Religion.
- Socio-economic, including social class, economic status.
- Environmental, including population density, available infrastructure.
- Individual, including age, gender.
- Education, including ethnic/professional subcultures.

Learning aim B: Examine how psychology contributes to the management of contemporary issues in health

B1 Contemporary issues in health

- Substance dependency.
- Eating behaviour.
- Exercise.
- Childbirth.

B2 Health psychology in relation to contemporary issues

- Health implications of substance addictions.
- Social learning perspective, addictive behaviour – from a psychological viewpoint.
- Psychological theories of causes of obesity, anorexia, bulimia.
- Ethics of the treatment of eating disorders.
- Physical and psychological benefits of exercise.
- Medicalisation of childbirth; cultural and religious issues; growth of caesarean sections; home births and water births, and the rationale behind them; other childbirth factors in local and regional communities.

Learning aim C: Investigate models of stress and related strategies for managing stress

C1 Development of stress models

- The fight or flight model, general adaptation syndrome.
- Life events theory.
- Psychosocial models of stress.
- Role of psychological factors, locus of control, personality type.

C2 Stress management strategies

- Coping strategies and responses, including problem-focused, emotion-focused, defence mechanisms.
- Stress-illness link, including effects of stress on immune system, effects of lack of or too much information on illness, role and extent of family and wider social support.
- Positive coping mechanisms, including relaxation techniques.
- Negative coping mechanisms, including substance abuse.
- Behavioural techniques, cognitive techniques.
- Importance to professionals of having knowledge of stress-management strategies.

Learning aim D: Explore the role of psychology in dealing with pain and ill health

D1 Concepts of pain and ill health

- Theories of pain.
- The role of psychological factors in pain perception.
- Organic pain, psychogenic pain.
- Acute and chronic pain, referred pain.
- Injury without pain, pain without injury.
- Measuring pain.
- Controlling pain, application of psychological approaches to alleviation of pain.

D2 Psychological theories related to pain and ill health

- Diagnosis and behaviour change.
- Alleviation of symptoms, coping mechanisms.
- Effect on families and dependants.
- Illnesses, including heart disease, cancer, back pain, asthma.

Assessment criteria

Learning aim A: Understand how influences and beliefs regarding health and ill health impact the development of health psychology as a discipline

Learning aim B: Examine how psychology contributes to the management of contemporary issues in health

Pass	Merit	Distinction
A.P1 Explain how concepts of health psychology, health and ill health influence health-related beliefs and behaviours.	**A.M1** Assess the extent to which concepts of health psychology, health and ill health influence health-related beliefs and behaviours.	**AB.D1** Evaluate the role of health psychology in addressing and managing health and ill health and contemporary issues in health.
B.P2 Explain how health psychology can be used in the management of different contemporary issues in health.	**B.M2** Assess the contribution of health psychology in the management of different contemporary issues in health.	

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Learning aim C: Investigate models of stress and related strategies for managing stress

Learning aim D: Explore the role of psychology in dealing with pain and ill health

Pass	Merit	Distinction
C.P3 Explain how stress can influence illness. **C.P4** Explain potential strategies that a selected individual can apply to manage stress.	**C.M3** Analyse strategies that a selected individual can apply to manage stress with reference to their link to illness.	**CD.D2** Evaluate the importance of health psychology's strategies and theories in helping a selected individual manage contemporary issues in relation to ill health, stress, pain and illness.
D.P5 Explain how psychology contributes to the management of pain. **D.P6** Explain how psychological theories can be applied to manage an individual's illness. [SP – C&I]	**D.M4** Justify how psychological theories can be applied to manage pain and ill health for an individual.	

Transferable skills

Managing Yourself	Effective Learning	Interpersonal Skills	Solving Problems
MY – TPR	EL – MOL	IS – WC	SP – CT
MY – PS&R	EL – CL	IS – V&NC	SP – PS
MY – COP	EL – SRS	IS – T	SP – C&I √
MY – PGS	EL – PRS	IS – C&SI	

Table key

*	Signposted to indicate opportunities for development as a part of wider teaching and learning
√	Embedded in teaching, learning and assessment
blank	Not embedded or signposted in unit

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Essential information for assignments

The recommended structure of assessment is shown in the unit summary, along with suitable forms of evidence. The *Pearson BTEC International Level 3 Qualifications Supplementary Information* document gives information on setting assignments. There is also further information on our website.

There is a maximum number of two summative assignments for this unit.

The relationship of the learning aims and criteria is:

Learning aims: A and B (A.P1, B.P2, A.M1, B.M2, AB.D1)

Learning aims: C and D (C.P3, C.P4, D.P5, D.P6, C.M3, D.M4, CD.D2)

Further information for teachers and assessors

Resource requirements

There are no special resources needed for this unit.

Essential information for assessment decisions

Learning aims A and B

For distinction standard, students will evaluate and reach reasoned and valid judgements on concepts of health psychology, health and ill health. Students must draw on knowledge and understanding, making suitable justifications about health psychology in relation to contemporary issues in health.

For merit standard, students will select and apply knowledge to demonstrate the relevance and purpose of concepts of health psychology, health and ill health. Students must use research to extend their understanding to detailed contexts of influences on beliefs and behaviours towards health and ill health. Students must interrelate facts, concepts and contexts, drawing suitable conclusions on health psychology in relation to contemporary issues in health.

For pass standard, students will recall and relate knowledge through understanding a range of appropriate concepts of health psychology, health and ill health. They must use research with relevance to given situations, including using data sources on influences on beliefs and behaviours towards health and ill health in own local or/and regional communities. Students must select and organise information, using appropriate knowledge and concepts, to make suitable judgements on health psychology in relation to contemporary issues in health.

Learning aims C and D

For distinction standard, students will articulate arguments and views concisely and professionally to justify their conclusions on theories and models of stress. They must show in-depth understanding that applies to less-familiar situations in relation to stress-management strategies appropriate for a selected individual. Students must draw on knowledge and understanding, making suitable justifications on concepts of pain and ill health and the contribution of psychological theories to their management strategy for an individual.

For merit standard, students will make reasoned analytical judgements involving comparison, discussion or justification of theories and models of stress. Students must show that they understand how knowledge is applied to detailed situations regarding stress-management strategies appropriate for a selected individual. Students must interrelate facts and contexts, drawing suitable conclusions on concepts of pain and

ill health and the contribution of psychological theories to their management strategy for an individual.

For pass standard, students will recall and relate knowledge through understanding a range of appropriate theories and models of stress. Students must explore well-defined applications of knowledge to demonstrate an understanding of stress-management strategies appropriate for a selected individual. Students must select and organise information using appropriate knowledge, making suitable judgements on concepts of pain and ill health and the contribution of psychology to their management strategy.

Links to other units

This unit links to:

- Unit 3: Promoting Public Health
- Unit 4: Principles of Safe Practice in Health and Social Care
- Unit 6: Psychological Perspectives
- Unit 8: Sociological Perspectives
- Unit 9: Principles of Effective Care
- Unit 21: Complementary Therapies for Health and Social Care.

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Unit 23: Work Experience in Health and Social Care

Level: 3

Unit type: Internal

Guided learning hours: 60

Unit in brief

Students will gain practical experience in health and social care settings, developing essential skills such as communication, empathy and professionalism. Students will reflect on their placement to inform future career choices and personal development.

Unit introduction

Work experience is a vital part of preparing for a career in health and social care. It provides you with the opportunity to gain insight into the realities of working in settings such as hospitals, care homes, community health centres and support services. Through direct involvement, you begin to understand the responsibilities, challenges and rewards of supporting individuals with diverse needs.

In this unit, you will explore the values and principles that underpin health and social care practice, including dignity, respect and safeguarding. You will develop key transferable skills such as communication, empathy and teamwork, while also learning about professional boundaries, confidentiality and the importance of person-centred care. Exposure to real-world environments helps you appreciate the impact of your role on individuals and communities.

Progression from this unit supports you in identifying future career pathways, whether in nursing, social work, occupational therapy or other allied health professions. It also helps you prepare for higher education, apprenticeships or regulated roles by building confidence, professional awareness and reflective practice. The experience gained will be instrumental in shaping your personal development plans and long-term goals.

Learning aims

In this unit you will:

A Investigate opportunities for work-related learning in the health and social care sector

B Carry out work experience in an appropriate and safe manner in a health and social care setting

C Reflect on work experience undertaken in the health and social care sector and its influence on own personal and professional development.

Summary of unit

Learning aim	Key content areas	Assessment approach
A Investigate opportunities for work-related learning in the health and social care sector	**A1** Work-related learning **A2** Outcomes and benefits of work experience **A3** Planning for work experience	Students will present a resource portfolio including details of research into a placement. This will cover tasks carried out and refer to health and safety.
B Carry out work experience in an appropriate and safe manner in a health and social care setting	**B1** Induction **B2** Role and tasks **B3** Working safely	
C Reflect on work experience undertaken in the health and social care sector and its influence on own personal and professional development	**C1** Learning from work placement **C2** Using feedback and setting goals	Students will present a reflection for a personal/professional development portfolio (PDP).

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Content

The essential content is set out under content areas. Students must cover all specified content before the assessment.

Learning aim A: Investigate opportunities for work-related learning in the health and social care sector

A1 Work-related learning (a minimum of 40 hours in total is required)

- Work experience opportunities, work placement: a period of work experience arranged with an employer.
- Virtual placements in health or social care settings.
- Community-based health initiatives.
- Shadowing telehealth professionals.
- Voluntary work: any type of work undertaken for no payment.
- Part-time work: paid or unpaid work undertaken.

A2 Outcomes and benefits of work experience

- Clarifying career goals.
- Gaining insight into the way health and social care settings operate and the challenges they face.
- Increasing skills and knowledge.
- Networking.
- Understanding a particular job or sector.
- Gaining referees.
- Attending in-house training courses.
- Understanding digital health systems (e.g. EHRs).
- Exposure to multidisciplinary care teams.
- Awareness of sustainability in care delivery.

A3 Planning for work experience

- Opportunities for work experience.
- Gaining information about the health and social care settings (e.g. from settings' leaflets, brochures or websites, students who have been on a work placement at the same setting, staff from the setting, conversation or correspondence with the setting, social or health care provider digital portals, online safeguarding training, consideration of vaccination requirements).
- Key information (e.g. hours of work, absence procedures, dress code, practical considerations such as criminal background checks).
- Application process.

Learning aim B: Carry out work experience in an appropriate and safe manner in a health and social care setting [EL – CL]

B1 Induction

- Information about the health and social care setting (e.g. structure, features).
- Work placement roles.
- Health and safety responsibilities (e.g. evacuation procedures, first-aid procedures, reporting hazards, safeguarding protocols, infection control procedures).
- Reporting absence and late arrival.
- Confidentiality, data protection in health records.
- Shadowing.

B2 Role and tasks

- Carrying out activities within the extent and limitations of role and responsibilities.
- Understanding how the role will develop key competencies needed for employability (e.g. self-management, teamwork, problem solving, communication skills, empathy and person-centred communication, understanding care plans, supporting vulnerable populations).
- Following instructions.
- Communicating with others.
- Self-management.
- Appropriate interaction.

B3 Working safely

- Identifying potential risks and hazards (e.g. slipping on wet floor, tripping over trailing wires, loud noise resulting in hearing loss, breathing in toxic substances, infection prevention (e.g. PPE use), mental health awareness, safe handling of individuals' data).
- Personal safe conduct (e.g. applying setting procedures, following and upholding health and safety rules, safe lifting, applying guidelines from training manual, following dress codes, personal safety equipment).

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Learning aim C: Reflect on work experience undertaken in the health and social care sector and its influence on own personal and professional development

C1 Learning from work placement

- Reflection on knowledge gained:
  - knowledge of new vocational area or area of interest
  - confirming whether or not to work in a particular setting
  - to find out further information about a particular career or setting.
- Reflection on skills used and gained, ethical decision making in care, cultural competence, digital literacy in health settings.
- Personal skills:
  - communication
  - problem solving
  - self-confidence
  - assertiveness
  - flexibility
  - positive approach.
- Work skills:
  - IT
  - teamwork
  - note taking
  - meeting attendance
  - punctuality
  - telephone manner
  - awareness of setting and individuals using health and social care setting
  - following instructions.
- Reflection on experiences gained:
  - identifying what went well and what could be improved
  - challenges faced
  - problems arising and how these were overcome or resolved.

C2 Using feedback and setting goals

- Feedback from teachers, supervisors, mentors, peers (e.g. identifying areas of positive and constructive feedback, highlighting areas for improvement).
- Setting goals for personal and professional development (e.g. short term, long term, personal, work-related goals, skills development, qualifications targeted).

Assessment criteria

Learning aim A: Investigate opportunities for work-related learning in the health and social care sector

Learning aim B: Carry out work experience in an appropriate and safe manner in a health and social care setting

Pass	Merit	Distinction
A.P1 Describe three realistic opportunities for work experience in health and social care, and how each can help prepare for working in health and social care environments. **A.P2** Explain own preparation for a selected health or social care placement, including safeguarding and confidentiality awareness. [MY – TPR]	**A.M1** Analyse the benefits of work experience and how it can help support in gaining a realistic understanding of roles in health and social care, including multidisciplinary teamwork.	**A.D1** Evaluate how preparing for work experience can support own understanding of health and social care settings and career pathways.
B.P3 Complete a logbook that explains own role in a selected health or social care placement, including responsibilities related to care and support. **B.P4** Describe in own logbook the health or social care-related activities undertaken by self in the workplace.	**B.M2** Analyse the importance of carrying out own role in a safe and appropriate manner, including infection control, safeguarding and maintaining dignity.	**B.D2** Evaluate the effectiveness of the setting's induction and health and safety practices, including safeguarding protocols and person-centred care, making recommendations for improvement.

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Learning aim C: Reflect on work experience undertaken in the health and social care sector and its influence on own personal and professional development

Pass	Merit	Distinction
C.P5 Review own strengths and areas for development during health or social care work experience, including communication, empathy and resilience. [MY – PS&R] **C.P6** Identify improvements to be made to own personal and professional health or social care skills in response to feedback from work experience.	**C.M3** Assess own performance during health or social care work experience, making recommendations for personal and professional development.	**C.D3** Evaluate own health or social care work experience, drawing reasoned conclusions as to how it can support own future career in the sector and inform own progression goals.

Transferable skills

Managing Yourself	Effective Learning	Interpersonal Skills	Solving Problems
MY – TPR √	EL – MOL	IS – WC	SP – CT
MY – PS&R √	EL – CL *	IS – V&NC	SP – PS
MY – COP	EL – SRS	IS – T	SP – C&I
MY – PGS	EL – PRS	IS – C&SI	

Table key

*	Signposted to indicate opportunities for development as a part of wider teaching and learning
√	Embedded in teaching, learning and assessment
blank	Not embedded or signposted in unit

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Essential information for assignments

The recommended structure of assessment is shown in the unit summary, along with suitable forms of evidence. The *Pearson BTEC International Level 3 Qualifications Supplementary Information* document gives information on setting assignments. There is also further information on our website.

There is a maximum number of two summative assignments for this unit.

The relationship of the learning aims and criteria is:

Learning aims: A and B (A.P1, A.P2, B.P3, B.P4, A.M1, B.M2, A.D1, B.D2)

Learning aim: C (C.P5, C.P6, C.M3, C.D3)

Further information for teachers and assessors

Resource requirements

For this unit, students must have access to a work placement for a minimum of 40 hours.

Essential information for assessment decisions

Learning aims A and B

For distinction standard, students will carry out in-depth research and select relevant evidence to show how they chose an appropriate work experience opportunity. Students will successfully use a variety of research techniques, choose and obtain an appropriate placement, and produce a fully supported evaluation of the benefits of the placement. Students will evaluate the health and safety practices in their health or social care placement settings and make recommendations for any required improvements.

For merit standard, students will select and apply relevant knowledge of work experience. Students will demonstrate clear analysis of the benefits of work experience, and how it can support them in gaining a realistic understanding of opportunities in the health and social care sector. They will also clearly explain the importance of carrying out their role in their chosen work experience in a safe and appropriate manner, while considering things such as confidentiality, infection control and safeguarding the individuals that they work with. They should also consider their role as part of the multidisciplinary team in their setting, and how all these roles work together for the best outcomes of the individuals in their care.

For pass standard, students will carry out research that allows them to initially explain appropriate work experience opportunities, then choose and describe their undertakings and skills shown in a work experience role, to consider things such as safeguarding and confidentiality awareness. They should ensure that they log the activities they undertake in their work experience, including own roles and responsiblities at the health or social care setting.

Learning aim C

For distinction standard, students will carry out in-depth reflection on their work experience and its benefits for their career in the future. Students will come to a reasoned conclusion, supported by relevant evidence and feedback from others, as to their strengths and areas for development, and reflect on opportunities for improvement to support own progression goals.

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For merit standard, students will reflect to show they have assessed the workplace skills they have been shown and, listening to the feedback from others, the skills they will need in future workplaces. Students will be able to successfully support their assessment with examples from the work experience to consider own performance, including reccomendations for personal and professional development.

For pass standard, students will review own strengths and areas for development to show an understanding of the skills needed in the workplace, both personal and professional, to include things such as their development of communication, empathy and resilience. They will use the feedback gained to suggest goals for improvement in their work experience within health or social care.

Links to other units

This unit links to all the other units in the specification.

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5 Planning your programme

Is there a student entry requirement?

As a centre it is your responsibility to ensure that students who are recruited have a reasonable expectation of success on the programme. There are no formal entry requirements but we expect students to have qualifications at or equivalent to Level 2.

Students are most likely to succeed if they have:

- five international GCSEs at good grades, and/or
- BTEC qualification(s) at Level 2
- other appropriate qualifications or achievement at year 11 or age 16 in core subjects. Students may demonstrate ability to succeed in various ways. For example, students may have relevant work experience or specific aptitude shown through diagnostic tests or non-educational experience.

If students are studying in English we recommend that they have attained at least Level B2 in the Common European Framework of Reference for Languages or Pearson Global Scale of English 51. Please see resources available from Pearson at www.pearson.com/english.

Supporting you in planning and implementing your programme

There will be lots of free teaching and learning support to help you deliver the new qualifications:

- Delivery guides are provided for each mandatory unit as well as a selection of optional units. These guides are intended to give an introduction to the unit, an overview of the assessment requirements, and a summary of the teaching content to be delivered and assessed.
- Sample delivery plans for all qualification sizes, designed to help you plan and deliver a teaching programme across a specified duration. These plans consist of the mandatory units required in each size as well as a selection of optional units recommended by us.
- Sample schemes of work are provided for each mandatory unit as well as a selection of optional units. These schemes of work are intended to show you how to deliver the teaching and assessment for each unit within the guided learning hours given. Each scheme of work provides an example of how each lesson can be structured, identifying key teaching topic areas, and how this content can be delivered using a range of teacher and student activities. These are available in Word™ format for ease of customisation.
- Our resources guide sets out the minimum resources required to support the planning, teaching and preparation for assessments for all units in this specification.

- For units assessed with a Pearson Set Assignment Brief, we have provided a sample assignment as an example of the form of assessment for the unit. For the remaining units, we will allow you to set your own assignments, according to your students' preferences and to link with your local employment profile. We also provide Authorised Assignment Briefs, which are approved by Pearson Standards Verifiers.
- Our transition guide highlights key similarities and differences between the new qualification and Pearson BTEC International Level 3 Qualifications in Health and Social Care 2022, which this qualification replaces.

Using Pearson Progress to support the planning, delivery and management of internal assessments

Pearson Progress is a digital support system that helps you to manage the assessment and quality assurance of these qualifications. This application supports the delivery, assessment and quality assurance of International BTECs in centres and supports teachers, assessors and students as follows:

- course creation
- creating and verifying assignments
- creating assessment plans and recording assessment decisions
- upload of assignment evidence
- tracking progress of every student.

The system is accessible to teachers and students so that they both can track their progress.

Training and support from Pearson

There are many people available to support you and give you advice and guidance on the delivery of these qualifications. They include the following:

- Subject Advisors – they understand all Pearson qualifications in their sector and can answer sector-specific queries on planning, teaching, learning and assessment.
- Standards Verifiers – they can support you with preparing your assignments, ensuring that your assessment plan is set up correctly, and support you in preparing student work and providing quality assurance through sampling.
- Regional teams – they are regionally based and have a full overview of the BTEC qualifications and of the support and resources that Pearson provides. Regions often run network events.
- Customer Services – the 'Support for You' section of our website gives the different ways in which you can contact us for general queries. For specific queries, our service operators can direct you to the relevant person or department.

Pearson provides a range of training and professional development events to support the introduction, delivery, assessment and administration of BTEC International Level 3 qualifications. These sector-specific events, developed and delivered by specialists, are available both face to face and online.

We also offer 'Getting Ready to Teach' events which are designed to get teachers ready for delivery of the BTEC International Level 3 qualifications. They include an overview of qualification structures, planning and preparation for internal assessment, and quality assurance.

Beyond the 'Getting Ready to Teach' professional development events, there are opportunities for teachers to attend sector- and role-specific events. These events are designed to connect practice to theory; they provide teacher support and networking opportunities with delivery, learning and assessment methodology.

Details of our training and professional development programme can be found on our website.

6 Understanding the qualification grade

Awarding and reporting for the qualification

This section explains the rules that we apply in awarding a qualification and in providing an overall qualification grade for each student. It shows how all the qualifications in this sector are graded.

Eligibility for an award

In order to be awarded a qualification, a student must complete all units AND achieve a Pass or above in all mandatory units unless otherwise specified. Refer to the structure in *Section 3 Structure*. Students must:

- complete and **have an outcome** (D, M, P or U) for all units within a valid combination
- achieve all the **mandatory units at Pass or above** shown in *Section 3 Structure*
- achieve the **minimum number of points** at a grade threshold.

It is the responsibility of a centre to ensure that a correct unit combination is adhered to. Students who do not achieve the required minimum grade (P) in units shown in the structure will not achieve a qualification.

Students who do not achieve sufficient points for a qualification or who do not achieve all the required units may be eligible to achieve a smaller qualification in the same suite, provided they have completed and achieved the correct combination of units and met the appropriate qualification grade points threshold.

Awarding the qualification grade

The final grade awarded for a qualification represents an aggregation of a student's performance across the qualification. As the qualification grade is an aggregate of the total performance, there is some element of compensation in that a higher performance in some units may be balanced by a lower outcome in others.

BTEC International Level 3 qualifications are awarded at the grade ranges shown in the table below.

Qualification	Available grade range
Certificate, Extended Certificate, Foundation Diploma	P to D*
Diploma	PP to D*D*
Extended Diploma	PPP to D*D*D*

The *Calculation of the qualification grade* table, shown later in this section, shows the minimum thresholds for calculating these grades. The table will be kept under review over the lifetime of the qualification. The most up-to-date table will be issued on our website.

Pearson will monitor the qualification standard and reserves the right to make appropriate adjustments.

Students who do not meet the minimum requirements for a qualification grade to be awarded will be recorded as Unclassified (U) and will not be certificated. They may receive a Notification of Performance for individual units. The *Information Manual* gives full information.

Points available for units

The table below shows the number of **points** available for units. For each unit, points are allocated depending on the grade awarded.

Grade	Unit size (60 GLH)
U	0
Pass	6
Merit	10
Distinction	16

Claiming the qualification grade

Subject to eligibility, Pearson will automatically calculate the qualification grade for your students when the unit grades are submitted and the qualification claim is made. Students will be awarded qualification grades for achieving the sufficient number of points (with valid combinations) within the ranges shown in the relevant *Calculation of the qualification grade* table for the cohort.

Calculation of the qualification grade

Applicable for registration from 1 September 2026.

Certificate		Extended Certificate		Foundation Diploma		Diploma		Extended Diploma	
180 GLH		360 GLH		540 GLH		720 GLH		1080 GLH	
Grade	**Points threshold**	**Grade**	**Points threshold**	**Grade**	**Points threshold**	**Grade**	**Points threshold**	**Grade**	**Points threshold**
Unclassified	0	U	0	U	0	U	0	U	0
Pass	18	P	36	P	54	PP	72	PPP	108
						MP	88	MPP	124
								MMP	140
Merit	26	M	52	M	78	MM	104	MMM	156
						DM	124	DMM	176
								DDM	196
Distinction	42	D	74	D	108	DD	144	DDD	216
						D*D	162	D*DD	234
								D*D*D	252
Distinction*	48	D*	90	D*	138	D*D*	180	D*D*D*	270

This table is subject to review over the lifetime of the qualification. The most up-to-date version will be issued via our website.

Example grading tables

In this section, you will find examples of how students can meet a range of qualification grade thresholds based on the unit points accumulated, to determine an overall qualification grade.

Pearson BTEC International Level 3 Certificate in Health and Social Care (180 GLH)

Achievement of a Certificate with a Merit grade

Unit number	GLH	Type (Int/PSA)	Grade	Unit points
1	60	PSA	Pass	6
8	60	PSA	Merit	10
12	60	Int	Distinction	16
TOTAL	**180**		**Merit**	**32**

In this example, the student has sufficient points for a Merit grade. The student has met the minimum requirement for Pass or higher in the mandatory unit.

Pearson BTEC International Level 3 Extended Certificate in Health and Social Care (360 GLH)

Achievement of an Extended Certificate with a Pass grade

Unit number	GLH	Type (Int/PSA)	Grade	Unit points
1	60	PSA	Distinction	16
2	60	PSA	Merit	10
9	60	Int	Pass	6
12	60	Int	Pass	6
16	60	Int	Pass	6
20	60	Int	Pass	6
TOTAL	**360**		**Pass**	**50**

In this example, the student has sufficient points for a Pass grade. The student has met the minimum requirement for Pass or higher in the mandatory units.

Pearson BTEC International Level 3 Foundation Diploma in Health and Social Care (540 GLH)

Achievement of a Foundation Diploma with a Distinction grade

Unit number	GLH	Type (Int/PSA)	Grade	Unit points
1	60	PSA	Distinction	16
2	60	PSA	Merit	10
3	60	PSA	Distinction	16
9	60	Int	Distinction	16
10	60	Int	Pass	6
12	60	Int	Merit	10
15	60	Int	Merit	10
16	60	Int	Distinction	16
17	60	Int	Distinction	16
TOTAL	**540**		**Distinction**	**116**

In this example, the student has sufficient points for a Distinction grade. The student has met the minimum requirement for Pass or higher in the mandatory units.

Pearson BTEC International Level 3 Diploma in Health and Social Care (720 GLH)

Achievement of a Diploma with a PP grade

Unit number	GLH	Type (Int/PSA)	Grade	Unit points
1	60	PSA	Merit	10
2	60	PSA	Merit	10
3	60	PSA	Distinction	16
4	60	PSA	Pass	6
5	60	PSA	Pass	6
9	60	Int	Pass	6
10	60	Int	Merit	10
12	60	Int	Unclassified	0
13	60	Int	Unclassified	0
15	60	Int	Pass	6
16	60	Int	Pass	6
17	60	Int	Merit	10
TOTAL	**720**		**PP**	**86**

In this example, the student has sufficient points for a PP grade despite receiving an Unclassified result for Units 12 and 13. The student has met the minimum requirement for Pass or higher in the mandatory units.

Pearson BTEC International Level 3 Diploma in Health and Social Care (720 GLH)

Achievement of a Diploma with an MM grade

Unit number	GLH	Type (Int/PSA)	Grade	Unit points
1	60	PSA	Merit	10
2	60	PSA	Merit	10
3	60	PSA	Distinction	16
4	60	PSA	Pass	6
5	60	PSA	Distinction	16
9	60	Int	Pass	6
10	60	Int	Merit	10
12	60	Int	Pass	6
13	60	Int	Pass	6
15	60	Int	Merit	10
16	60	Int	Distinction	16
17	60	Int	Merit	10
TOTAL	**720**		**MM**	**122**

In this example, the student has sufficient points for an MM grade. The student has met the minimum requirement for Pass or higher in the mandatory units.

Pearson BTEC International Level 3 Diploma in Health and Social Care (720 GLH)

An Unclassified result for a Diploma

Unit number	GLH	Type (Int/PSA)	Grade	Unit points
1	60	PSA	Unclassified	0
2	60	PSA	Merit	10
3	60	PSA	Distinction	16
4	60	PSA	Pass	6
5	60	PSA	Distinction	16
9	60	Int	Pass	6
10	60	Int	Merit	10
12	60	Int	Pass	6
13	60	Int	Pass	6
15	60	Int	Merit	10
16	60	Int	Distinction	16
17	60	Int	Merit	10
TOTAL	**720**		**Unclassified**	**112**

In this example, the student has sufficient points for an MM grade but has not met the minimum requirement for Pass or higher in all of the mandatory units. An Unclassified result for Unit 1.

Pearson BTEC International Level 3 Extended Diploma in Health and Social Care (1080 GLH)

Achievement of an Extended Diploma with an MMM grade

Unit number	GLH	Type (Int/PSA)	Grade	Unit points
1	60	PSA	Pass	6
2	60	PSA	Merit	10
3	60	PSA	Pass	6
4	60	PSA	Pass	6
5	60	PSA	Distinction	16
6	60	PSA	Pass	6
7	60	PSA	Pass	6
8	60	PSA	Merit	10
9	60	Int	Pass	6
10	60	Int	Distinction	16
11	60	Int	Merit	10
12	60	Int	Pass	6
13	60	Int	Unclassified	0
14	60	Int	Merit	10
15	60	Int	Pass	6
17	60	Int	Merit	10
19	60	Int	Distinction	16
22	60	Int	Merit	10
TOTAL	**1080**		**MMM**	**156**

In this example, the student has sufficient points for an MMM grade despite receiving an Unclassified result for Unit 13. The student has met the minimum requirement for Pass or higher in the mandatory units.

Pearson BTEC International Level 3 Extended Diploma in Health and Social Care (1080 GLH)

Achievement of an Extended Diploma with a DDD grade

Unit number	GLH	Type (Int/PSA)	Grade	Unit points
1	60	PSA	Distinction	16
2	60	PSA	Merit	10
3	60	PSA	Merit	10
4	60	PSA	Pass	6
5	60	PSA	Distinction	16
6	60	PSA	Pass	6
7	60	PSA	Distinction	16
8	60	PSA	Distinction	16
9	60	Int	Merit	10
10	60	Int	Distinction	16
11	60	Int	Merit	10
12	60	Int	Distinction	16
13	60	Int	Merit	10
14	60	Int	Merit	10
15	60	Int	Distinction	16
17	60	Int	Merit	10
19	60	Int	Distinction	16
22	60	Int	Merit	10
TOTAL	**1080**		**DDD**	**220**

In this example, the student has sufficient points for a DDD grade. The student has met the minimum requirement for Pass or higher in the mandatory units.

Pearson BTEC International Level 3 Extended Diploma in Health and Social Care (1080 GLH)

An Unclassified result for an Extended Diploma

Unit number	GLH	Type (Int/PSA)	Grade	Unit points
1	60	PSA	Unclassified	0
2	60	PSA	Merit	10
3	60	PSA	Pass	6
4	60	PSA	Pass	6
5	60	PSA	Pass	6
6	60	PSA	Pass	6
7	60	PSA	Merit	10
8	60	PSA	Merit	10
9	60	Int	Merit	10
10	60	Int	Pass	6
11	60	Int	Merit	10
12	60	Int	Unclassified	0
13	60	Int	Pass	6
14	60	Int	Merit	10
15	60	Int	Unclassified	0
17	60	Int	Merit	10
19	60	Int	Pass	6
22	60	Int	Merit	10
TOTAL	**1080**		**Unclassified**	**122**

In this example, the student has sufficient points for a PPP grade but has not met the minimum requirement for Pass or higher in all of the mandatory units. An Unclassified result for Unit 1.

Appendix 1 Glossary of terms used for internally assessed units

Term	Definition
Adequate	Student work is satisfactory or acceptable in quality and quantity.
Analyse	Students break the issue/situation down into the key elements and show their understanding of the issues/situation applied to the scenario/context. Responses would be significantly beyond generic.
Apply/use/employ	Students implement a method, technique, process or approach in an activity.
Assess	Students give careful consideration to all the factors or events that apply, identify which are the most important or relevant, and make a judgement on the importance of the factors.
Carry out	Students demonstrate skills through practical activities, in line with certain requirements.
Clear/ly	The qualities required are well demonstrated, unambiguous and beyond a basic level.
Coherent	Student intentions are clear, logically structured and can be interpreted by others.
Compare	Students show knowledge and understanding by identifying the main factors relating to two or more items/situations or aspects of a subject that is extended with the required explanations, e.g. similarities/ differences, advantages/disadvantages, impacts.
Comprehensive	Used to describe either scope or depth, for example: Student work is well developed and thorough, covering all aspects/information in terms of both depth and breadth. OR Students demonstrate in-depth and accurate understanding of the aspects being assessed.
Confident	Student work demonstrates well-developed and secure application of skills or processes that are significantly beyond a basic level.

Term	Definition
Consistent	Students demonstrate reliable and constant practice that maintains a set standard.
Create/produce	Students generate an idea/outcome to specific criteria.
Demonstrate	Students carry out and apply knowledge, understanding and/or skills in a practical situation.
Describe	Students provide an account of something, or highlight a number of key features of a given topic or process, that shows a level of understanding.
Detailed	Students cover most if not all of the expected requirements and demonstrate a high level of understanding.
Develop	Students apply a process of improving/progressing skills, concepts or work in order to produce outcomes.
Discuss	An issue, situation or process will be presented and the student will need to break the issue/situation/process down into the key elements, show their understanding of the issues/situation/process applied to the scenario/context (so generic answers are not acceptable), and show interrelationship in their answers.
Effective	Students demonstrate skills or provide outcomes that are well developed with a range of proficient qualities and that achieve objectives.
Evaluate	Students consider various aspects of a subject's qualities in relation to its context such as strengths or weaknesses, advantages or disadvantages, pros or cons. They will come to a judgement supported by evidence, which will often be in the form of a conclusion.
Examine	Students demonstrate an ability to thoroughly inspect something in order to determine its qualities beyond a basic exploration.
Explain	Students can give an insight into the topic showing some level of understanding by providing reasons or examples.
Explore	Students undertake practical research or investigation to develop their skills or understanding of the topic/activity.
Implement	Students take actions or measures to put something into effect.

Term	Definition
Investigate	Students perform a systematic inquiry into a topic using research skills, usually to demonstrate their understanding of a topic.
Justify	Students give relevant and logical reasons or evidence to support their actions or opinions.
Partial/some	To an extent, but not completely. Students do not include all of the requirements.
Perform	Students demonstrate a range of skills required to complete a given activity.
Prepare	Students organise a task/equipment/individuals/activities in advance of carrying it out.
Realistic/feasible	Students demonstrate insight into the logistics and manageability of proposals/plans/objectives/ideas and show consideration of the potential to achieve the outcomes.
Refine/optimise	Students make considered improvements to outcomes.
Review	Students consider evidence in order to make judgements about the qualities.
Understand	Students demonstrate insight or ability to interpret a subject.
Undertake	Students demonstrate skills through practical activities, often referring to given processes or techniques.

Appendix 2 Transferable Skills framework

Code = transferable skill initials-skill cluster initials

Managing yourself

Code	Skill cluster	Performance descriptor
MY-TPR	Taking personal responsibility	• Demonstrates understanding of their role and responsibilities and the expected standards of behaviour. • Demonstrates compliance with codes of conduct and ways of working. • Makes use of available resources to complete tasks. • Manages their time to meet deadlines and the required standards. • Demonstrates accountability for their decisions or actions.
MY-PS&R	Personal strengths and resilience	• Identifies own personal strengths and demonstrates the ability to use these in relevant areas. • Demonstrates the ability to adapt own mindset and actions to changing situations or factors. • Uses challenges as learning opportunities.

Code	Skill cluster	Performance descriptor
MY-COP	Career orientation planning	• Undertakes research to understand the types of roles in the sector in which they could work. • Reviews own career plans against personal strengths and identifies areas for development to support progression into selected careers. • Takes part in sector-related experiences to support career planning.
MY-PGS	Personal goal setting	• Sets SMART goals using relevant evidence and information. • Reviews progress against goals and identifies realistic areas for improvement. • Seeks feedback from others to improve own performance.

Effective learning

Code	Skill cluster	Performance descriptor
EL-MOL	Managing own learning	• Maintains a focus on own learning objectives when completing a task. • Demonstrates the ability to work independently to complete tasks. • Reviews and applies learning from successful and unsuccessful outcomes to be effective in subsequent tasks.
EL-CL	Continuous learning	• Engages with others to obtain feedback about own learning progress. • Responds positively to feedback on learning progress from others. • Monitors own learning and performance over the short- and medium-term.
EL-SRS	Secondary research skills	• Defines the research topic or question. • Uses valid and reliable sources to collate secondary data. • Interprets secondary data and draws valid conclusions. • Produces a reference list and cites sources appropriately.
EL-PRS	Primary research skills	• Defines the research topic or question. • Carries out primary data collection using appropriate and ethical research methodology. • Interprets primary data to draw valid conclusions.

Interpersonal skills

Code	Skill cluster	Performance descriptor
IS-WC	Written communication	• Produces clear formal written communication using appropriate language and tone to suit purpose.
IS-V&NC	Verbal and non-verbal communications	• Uses verbal communication skills effectively to suit audience and purpose. • Uses body language and non-verbal cues effectively. • Uses active listening skills and checks understanding when interacting with others.
IS-T	Teamwork	• Engages positively with team members to understand shared goals, and own roles and responsibilities. • Respectfully considers the views of team members and consistently shows courtesy and fairness. • Completes activities in line with agreed role and responsibilities. • Provides support to team members to achieve shared goals.
IS-C&SI	Cultural and social intelligence	• Demonstrates awareness of own cultural and social biases. • Demonstrates diversity, tolerance and inclusivity values in their approach to working with others.

Solving problems

Code	Skill cluster	Performance descriptor
SP-CT	Critical thinking	• Demonstrates understanding of the problem or issue to be addressed. • Makes use of relevant information to build ideas and arguments. • Assesses the importance, relevance and/or credibility of information. • Analyses, interprets and evaluates information to present reasoned conclusions.
SP-PS	Problem solving	• Presents a clear definition of the problem. • Gathers relevant information to formulate proposed solutions. • Selects relevant and significant information to formulate proposed solutions. • Identifies negative and positive implications of proposed solutions. • Presents and justifies selected solutions to problems.
SP-C&I	Creativity and innovation	• Identifies new and relevant ideas to help solve a problem. • Refines ideas into workable solutions based on test results and/or feedback.

Appendix 3 Digital Skills framework

Problem solving

Using digital tools to analyse and solve problems:

Performance descriptor	Unit mapping
Use digital tools and techniques for research, collaboration and resolution of problems.	Unit 1, content area A and C. Unit 23, content area A, B, C.
Have up-to-date knowledge of ways that technology is used within a sector.	Unit 1, content area A. Unit 23, content area A, B, C.
Present ideas and findings using digital tools.	Unit 4, content area A, B and C.
Use digital tools to manipulate data.	Unit 3, content area D.

Digital collaboration and communication

Using digital tools to communicate and share information with stakeholders:

Performance descriptor	Unit mapping
Understand and use digital collaboration and communication platforms.	Unit 4, content area B and C. Unit 23, content area A, B, C.
Use collaboration tools to meet with, share and collaborate with customers and colleagues.	Unit 9, content area A and C. Unit 23, content area A, B, C.

Transacting digitally

Using digital tools to set up accounts and pay for goods/services:

Performance descriptor	Unit mapping
Use online systems to access and update digital records.	Unit 4, content area A, B and C.
Set up accounts to complete transactions.	Unit 4, content area A, B and C.

Digital security

Identify threats and keep digital tools safe:

Performance descriptor	Unit mapping
Understand the types of malware.	Unit 4, content area A, B and C.
Understand the threats involved in carrying out online activities.	Unit 4, content area A, B and C.
Protect personal and organisation information and data.	Unit 4, content area A, B and C.
Keeping systems secure.	Unit 4, content area A, B and C.

Handling data safely and securely

Follow correct procedures when handling personal and organisational data:

Performance descriptor	Unit mapping
Manage passwords and keep them secure.	Unit 4, content area A, B and C.
Identify websites and services that are secure and insecure.	Unit 4, content area A, B and C.
Understand the digital policy for a sector.	Unit 4, content area A, B and C.
Understand the impact of online data.	Unit 4, content area A, B and C.
Understand copyright and intellectual property.	Unit 4, content area A, B and C.

Appendix 4 Sustainability framework

Sustainable development goal	Unit mapping
SDG 1: No poverty	Unit 1, content area A, B, C. Unit 2, content area C. Unit 5, content area A. Unit 8, content area A, C. Unit 9, content area A, C. Unit 10, content area A, C, D. Unit 13, content area B, C. Unit 15, content area B, C. Unit 23, content area A, B, C.
SDG 2: Zero hunger	Unit 1, content area A, B, C. Unit 5, content area A. Unit 13, content area A, B, C. Unit 14, content area A, B, C. Unit 15, content area B, C. Unit 16, content area A, B.
SDG 3: Good health and wellbeing	Unit 1, content area A, B, C. Unit 2, content area C. Unit 3, content area A, D. Unit 4, content area A. Unit 6, content area A, B, C. Unit 7, content area A. Unit 8, content area A, B, C. Unit 9, content area A, B, C. Unit 10, content area A, B, C, D. Unit 11, content area A, B, C. Unit 12, content area B, C, D. Unit 13, content area A, B, C. Unit 14, content area A, B, C. Unit 15, content area B, C. Unit 16, content area A, B. Unit 17, content area A, D.

Sustainable development goal	Unit mapping
	Unit 18, content area B, C, D. Unit 19, content area A, B, C, D. Unit 21, content area A, B, C. Unit 22, content area A, B, C, D. Unit 23, content area A, B, C.
SDG 4: Quality education	Unit 1, content area A, B, C. Unit 2, content area C. Unit 6, content area A. Unit 9, content area C. Unit 11, content area A, B, C. Unit 13, content area A, B, C. Unit 21, content area C. Unit 22, content area C, D. Unit 23, content area A, B, C.
SDG 5: Gender equality	Unit 1, content area A, B, C. Unit 6, content area A, B, C. Unit 8, content area A, C. Unit 9, content area C. Unit 13, content area B, C. Unit 17, content area A. Unit 21, content area C. Unit 22, content area A, B. Unit 23, content area A, B, C.
SDG 6: Clean water and sanitation	Unit 1, content area A, B, C. Unit 3, content area B. Unit 5, content area A. Unit 7, content area A. Unit 13, content area B, C. Unit 17, content area A.
SDG 7: Affordable and clean energy	Unit 13, content area B, C.

Sustainable development goal	Unit mapping
SDG 8: Decent work and economic growth	Unit 6, content area B, C. Unit 8, content area B, C. Unit 13, content area B, C. Unit 17, content area A. Unit 20, content area A, B. Unit 22, content area A, B, C, D. Unit 23, content area A, B, C.
SDG 9: Industry, innovation and infrastructure	Unit 13, content area A, B, C.
SDG 10: Reduced inequalities	Unit 1, content area A, B, C. Unit 2, content area C. Unit 3, content area B. Unit 5, content area A. Unit 6, content area B, C. Unit 8, content area B, C. Unit 9, content area C. Unit 13, content area A, B, C. Unit 14, content area B, C. Unit 15, content area B, C. Unit 16, content area A, B, C. Unit 17, content area D. Unit 21, content area A, B. Unit 22, content area A. Unit 23, content area A, B, C.
SDG 11: Sustainable cities and communities	Unit 13, content area B. Unit 23, content area A, B, C.
SDG 12: Responsible consumption and production	Unit 6, content area B, C. Unit 9, content area C. Unit 13, content area B. Unit 23, content area A, B, C.
SDG 13: Climate action	Unit 5, content area A. Unit 13, content area B, C. Unit 16, content area A, B, C.

Sustainable development goal	Unit mapping
SDG 14: Life below water	Unit 13, content area B, C.
SDG 15: Life on land	Unit 13, content area B, C.
SDG 16: Peace, justice and strong institutions	Unit 6, content area C. Unit 9, content area C. Unit 13, content area B, C. Unit 23, content area A, B, C.
SDG 17: Partnerships for the goals	Unit 2, content area C. Unit 3, content area A. Unit 6, content area A, B, C. Unit 8, content area B, C. Unit 9, content area A, B. Unit 13, content area A. Unit 17, content area A.

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