Year 13

	Autumn 1	Autumn 2	Spring 1	Spring 2	Summer 1	Summer 2	
Content	NJL		NJL		NJL		
Declarative	Health, Safety & Security in Health & Social Care		Health, Safety & Secu	Health, Safety & Security in Health & Social		Health, Safety & Security in Health & Social	
knowledge	– Exam Unit		Care – Exam Unit (cont)		Care – Exam Unit (completed)		
"I know"	LO1 Understand potential hazards in health,		LO3 Understand the roles and responsibilities involved in health, safety and security in health, social care and child care environments I know/I know about		LO4 Know how to respond to incidents and emergencies in a health, social care or child care environment I know/I know about		
	social care and child care environments I know Types of hazards, i.e. • environmental (e.g. slip						
	and trip hazards) • biolo	and trip hazards) • biological (e.g. waste,		Roles, i.e. • employers, i.e. NHS o Local		Incidents and emergencies, i.e. • accidents •	
	infection) • chemical (e.g. medicines, cleaning materials) • psychological (e.g. stress, fatigue) • physical (e.g. noise, radiation) • musculoskeletal (e.g. manual handling, DSE (display screen equipment)) • working conditions (e.g.		Authority, care manager/private care home owner o headteacher/Board of Governors o		exposure to infections • exposure to chemicalsspillages • intruders • aggressive and		
			third sector (e.g. Barn	ardo's, Age UK, National	dangerous encounters	(e.g. intoxicated	
			Autistic Society) • employees • individuals who require care and support		individuals) • fire • floods • loss of water supply • other critical incidents (e.g. power		
temperature, noise, f		vel) • working practices			cut, bomb threat, gas le	eak)	
	(e.g. working hours, supervision) • lack of		Responsibilities, i.e. • employers' role in				
	security systems (e.g. door locks, alarm systems) 1.2 Potential impacts of hazards for individuals who require care or support, employees and employers, i.e. • injury or harm • illness • poor standards of care • financial loss (e.g. theft, high			ng and enforcing health	•	and emergencies, i.e. •	
			, ,	d procedures (e.g. overall	g organisational • follow-up review of critical incidents a	•	
			responsibility for follo	~ ~			
			policies and procedur		emergencies • report to relevant author		
					ing the police, notifying		
staff turnover, legal action)		' '	nce in accordance with	social services)			
	Harm and abuse, i.e. • i	, ,	<u> </u>	ıs or imminent danger,			
		entional abuse (e.g. poor		n employers' health and	-	st aider, i.e. • assess for	
	care provided) • effects of abuse (e.g. illness,		· -	 individuals who require 	danger • keeping themselves and the are		
	injury, fear) 1.4 Types of settings, i.e. • health			ir role in understanding		• maintain respect and	
	environment (e.g. hospital, GP surgery) • care		•	policies and practices in	· · ·	y with an individual until	
	environment (e.g. residential care home,		the environment in which they are being		help arrives		
individual's home) • child care environment (e.g.			ing to the care settings'				
	nursery, school) • public environment (e.g.		procedures)				
	shopping centre, park) • transport (e.g. minibus,						
	ambulance)		•	meeting responsibilities,			
			i.e. • direct costs (e.g.	claims on employers and			

2. Understand how legislation, policies and procedures promote health, safety and security in health, social care and child care environments Legislation, i.e. • Health and Safety at Work Act 1974 • Management of Health and Safety at Work Regulations 1999 • Food Safety Act 1990 • Food Safety (General Food Hygiene) Regulations 1995 • Manual Handling Operations Regulations 1992 • Reporting of Injuries, Diseases and Dangerous Regulations (RIDDOR) 2013 • Data Protection Act 1998 • Control of Substances Hazardous to Health (COSHH) 2002 • Civil	public liability insurance, sick pay, fines) • indirect costs (e.g. recruitment costs, overtime payments, low staff morale) • disciplinary action (e.g. first written warning, final written warning, dismissal)	
Safeguarding, i.e. • the need for safeguarding • Disclosure and Barring Service (DBS) • Disclosure and Barring Service checks 2.3 Influences of legislation on, i.e. • staff (e.g. staffing numbers, level of education) • premises (e.g. fire exits, accessibility) • practices (e.g. reporting, storage of information) 2.4 Implementation of policies and procedures, i.e. • health and safety management systems • workplace hazards and risk controls (risk assessment) • fire safety •		
risk controls (risk assessment) • fire safety • asbestos • transport hazards • electrical safety • safeguarding • reporting of accidents • food safety • chemical and biological health hazards • disposal of hazardous wastes (e.g. needles, body waste, expired medication) • lone working • storage and dispensing of medicines • security of premises, possessions and individuals		
Review of policies and procedures KB Equality Diversity & Rights in Health & Social Care – Exam Unit	KB Public Health – Coursework LO1	KB Coursework mop-up, preparation for final moderation

LO1 Understand concepts of equality, diversity and rights and how these are applied in the context of health, social care and child care environments

I know about...

Equality, i.e. a person is respected as an individual, treated fairly, given the same opportunities regardless of differences, treated according to needs

Diversity, i.e. race, religion, cultural differences, gender and gender reassignment ,sexuality and sexual orientation, age, family structure, marriage and civil partnership, social class, language, dress, food, music

the arts, education, pregnancy and maternity and disability

Rights, i.e. choice, confidentiality, protection from abuse and harm, equal and fair treatment, consultation, right to life

I know how to apply the values of care in health and social care services, promoting equality and diversity.

How to promote individual rights and beliefs and maintain confidentiality.

I know... the values of care in child care services and how they contribute to making the welfare of the child paramount, keeping children safe and maintaining a healthy environment.

I know how care professionals work in partnership with parents/guardians and families and other professionals, encouraging children's learning and development, valuing diversity, ensuring equality of opportunity, promoting anti-discriminatory practice, maintaining

Understand systems for the protection and promotion of public health.

I know...

1.1 Legislation and regulations, i.e.

The Sanitary Report 1842

The Sanitary Act 1866

The Public Health Act 1848, 1936, 1961, 1984
Public Health Act (control of diseases)1984 and
(infectious diseases) Regulations 1988
Food safety Act 1990

Smoking ban 2007

Smoking ban in cars regulations 2015

Organisations, i.e.

World Health Organisation (WHO) National Health Service (NHS)

Public Health England

National Institute for Health and Clinical

Excellence (NICE)

Food Standards Agency

Health and safety executive

Third Sector (e.g. Diabetes UK, British Heart Foundation)

Current public health issues and targets (e.g. childhood obesity, increase cancer survival rate, reduction in heart disease/strokes, smoking cessation, reduction in alcohol consumption, physical inactivity)

Practitioners involved in promoting public health (e.g. midwife, GP, health visitor, environmental health officer, public health inspector, health promotion officer/health education specialists)

Current public health strategies, i.e.

confidentiality and working with other professionals to ensure information is shared.

I know about support networks, i.e. advocacy services (e.g. SEAP, MENCAP Empower Me, British Institute of Learning Disabilities) Support groups (e.g. MIND, Age UK, Headway) Informal support (e.g. friends, family, neighbours)

2. Understand the impact of discriminatory practices on individuals in health, social care and child care environments

I know about...

Discriminatory practices, i.e. basis of discrimination (e.g. race, culture, disability, social class, age, gender, sexual orientation, religion) Direct and indirect discrimination Types of abuse, prejudice, stereotyping, labelling and bullying

I know how individuals affected are affected by inequality i.e. individuals who require care and support (e.g. patients, children, older adults, people with disabilities), family/friends/relatives of individuals, practitioners (e.g. nurse, G.P., physiotherapist, teacher, early years practitioner, social worker, care assistant, care worker)

I understand the potential impact upon individuals i.e. disempowerment, low self-esteem and low self-confidence, poor health and wellbeing, unfair treatment, mental health.

- health screening (e.g. breast/prostate/bowel cancer screening programmes, chlamydia screening for 15-24 year olds, NHS health check for adults aged 40-74, National Child Measurement programme)
- immunisation and vaccination (e.g. HPV, meningitis, routine childhood immunisations, 'flu' vaccine)
- environmental protection (e.g. waste disposal, food preparation and sale, safe water supply)

Government initiatives (e.g. standardised cigarette packaging, 'Harmful Drinking' policy 2013, obesity and healthy eating policy 2013, smoking policy 2013, cancer research and treatment policy 2013, drug misuse and dependency policy 2013, Government standards for school lunches, recycling.)

• Health promotion (e.g. Change4Life campaign, Smokefree, Drinkaware)

LO3 I know key aspects of current Legislation, i.e. The Care Act 2014, The Health and Social Care Act 2012, Equality Act 2010, The Mental Capacity Act 2005, The Children Act 2004, The Data Protection Act 1998, Human Rights Act 1998, Children and families Act 2014

I have an overview of national initiatives, i.e. The Care Certificate 2014, Quality assurance i.e. o inspections such as Ofsted, CQC (Care Quality Commission), EHRC(Equality and Human Rights Commission), NICE – National Institute for Health and Care Excellence

I know....The impact of legislation and national initiatives, i.e. person-centred approach to care and provision, individual needs met, empowerment, accessible services, provides a system of redress, clear guidelines for practitioners to follow, raises standards of care, staff selection and interview procedures must comply with the Equality Act, organisational policies - bullying, confidentiality, equal opportunities, data handling

LO4. Understand how equality, diversity and rights in health, social care and child care environments are promoted.

I understand how to apply best practice in health, social care or child care environments, i.e. being non-judgemental, respecting the views, choices and decisions of individuals who require care and support, anti discriminatory practice, valuing diversity, using effective communication, following agreed ways of working, provision of training and professional development opportunities for staff, mentoring, monitoring

	know aboutacceptable methods of challenging discrimination (e.g. challenge at the time, challenge afterwards through procedures or chrough long-term campaigns), whistleblowing applying values of care, providing information about complaints procedures, advocacy services, mplementing policies, codes of practice, egislation, dealing with conflict, training, mentoring, monitoring		
Procedural I Knowledge I "I know how to" I	NJL Health, Safety & Security know how to LO1 dentify potential hazards in health and social	NJL Health, Safety & Security LO3 I know how to Learners must identify and describe the roles	NJL Health Safety & Security LO4 I know how to Identify different incidents and emergencies in health and social care settings

I am able to identify potential hazards and explain how these hazards can affect staff and/or individuals who require care and support, (e.g. a high workload due to staff absence can cause stress which can cause high blood pressure, poor ventilation can cause respiratory illnesses or poor personal hygiene can cause the spread of MRSA).

I understand that abuse can be against the individual(s) who requires care or support but also against the employee from the individual(s).

I am able to distinguish between intentional and unintentional abuse and its effects, (e.g. theft is intentional and unintentional abuse, poor care leading to pressure ulcers).

I am able to evaluate the effects that abuse can have on individual(s) whom require care and support and on the employee(s).

I am able to analyse the types of hazards that can be in different types of care settings, e.g. in a hospital there is the potential for a MRSA outbreak. In an infant school there are toys that could potentially be choking hazards.

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I am able to identify key aspects of each piece of legislation and analyse how these promote health, safety and security in health and social care settings. For example, the Food Safety (General Hygiene). Regulations 1995 means that raw meat and ready-to-eat products have to be prepared on separate chopping boards to prevent cross-contamination. Cross contamination can lead to food poisoning, which could be deadly for those who have underlying

settings, e.g. it is the responsibility of the employer to ensure records and information about employees are maintained and up to date. Learners must also analyse possible consequences of not meeting their responsibilities, e.g. an employer could be criminally prosecuted for not maintaining accurate records.

KB

Public Health - Coursework

I know how to...

LO1

Learners must be able to present a summary which illustrates the origins of public health and related legislation. Additionally they must explain the role of national organisation and practitioners in promoting public health. For this LO learners will benefit from drawing on learning from mandatory Unit 3 Health, safety and security in health and social care, Unit 5 Infection control, Unit 11 Career planning in health and social care, Unit 22 Psychology for health and social care and Unit 23 Sociology for health and social care LO3.

LO₂

Learners must explain the different strategies which may be used to promote public health. For M1, learners must also explain how organisations and practitioners may work together on strategies to promote public health. For D1, learners need to analyse the effectiveness of different public health strategies. For this LO learners will benefit from drawing on learning from Unit 14 The impact of long-term physiological conditions and Unit 15 Promoting health and wellbeing.

I am able to describe how the setting could respond to the incident or emergency e.g. a private care home would need to evacuate residents and staff following a specific procedure and contact the fire services. Learner must be able to identify and describe the responsibilities of a first aider.

health conditions therefore having food safety in the workplace promotes good food hygiene and prevents illness. Learners must be taught any changes to legislation which supersedes those listed in the teaching content.

I am able to describe the reasons for having a DBS system in place, e.g. to ensure that staff being employed are safe to work with vulnerable adults and children. Learners must assess how legislation influences various factors in health and social care settings, e.g. Care managers need to ensure that staff to client ratios are maintained. Learners need to analyse the importance of policies and procedures and how they are implemented in different health and social care settings, e.g. Fire evacuation will be different in a hospital compared to that of a residential home or infant school. Learners must describe the consequences if policies and procedures are not followed by staff, e.g. staff may be offered training courses or face disciplinary action for not following the correct policies or procedures.

KΒ

Equality, Diversity & Rights
I understand the implications of diversity on
practice and also the effects of discriminatory
practice on individuals who require care or
support.

I have an appreciation of how legislation and national initiatives can support and promote anti-discriminatory practice.

I understand strategies used to promote equality, respect diversity and support individuals' rights will be examined.

I can recognise both good and discriminatory practice in care situations.

I have developed my judgement and decisionmaking skills and can use these to choose appropriate responses to care situations and determine a course of action to promote the equality, diversity and rights of individuals in care settings.

LO1

I have an understanding of the key concepts of equality, diversity and rights.

I am able to define key terms and concepts and be able to describe the benefits of understanding diversity (e.g. empowerment, independence, inclusion, respect, dignity, opportunity, access and participation) Learners must develop an understanding of how all of the values of care are applied in health and social care and in child care environments.

I am able to analyse practical examples of how practitioners can apply the values in their day to day work, in care settings, to promote equality, respect diversity and support individuals who require care or support. Learners must develop an understanding of the support networks available to promote equality, diversity and rights.

LO2

I am able to identify the factors that can incite discrimination or discriminatory behaviour and the individuals that this may affect.

I can reflect on and analyse my own attitudes and prejudices, or those of others that they may have experienced or observed. Learners must be able to define the correct use of terminology listed in the unit content and also forms of discrimination, i.e. racism, ageism, sexism and homophobia. Learners must be able to evaluate the impact of discrimination on individuals, including physical, intellectual, emotional and social effects.

LO3

I am able to identify key aspects of each piece of legislation and be able to describe how these support individuals' rights. The Care Act 2014 (e.g. there should be no gap in care and support when people choose to move), The Health and Social Care Act 2012 (e.g. greater voice for patients), The Equality Act 2010 (e.g. the introduction of protected characteristics), The Mental Capacity Act 2005 (e.g. capacity must be assumed unless it is proved otherwise), The Children Act 2004 (e.g. introduction of the role of children's commissioner), The Data Protection Act 1998 (e.g. Personal data shall be accurate and, where necessary, kept up to date)

I am able to explain how the various national initiatives provide a framework to maintain and improve quality of practice; how they provide guidance for those working in health, social care and child care environments and how they set out the standard of practice and conduct expected.

I am able to evaluate the impact of legislation and national initiatives. For example the Equality Act gives all service users the right to access services; this means that the service provider may have to install ramps and lifts and provide information in a range of formats. Practitioners may have to attend training to become proficient in sign language.

Learners need to explain the role of formal and informal support groups in helping individuals deal with discriminatory practice and to obtain redress.

LO4

I am able to identify how anti-discriminatory practice is promoted within health, social care and child care services.

I am able to analyse situations in health, social care and child care settings to reach a decision about the correct course of action a practitioner should take.

I am able to use my knowledge and understanding of the unit content to apply best practice in care situations and also be able to explain discriminatory practices in a range of settings.

I am able to prioritise actions in response to discriminatory practice in the best interests of the individuals who require care or support.

I can make use of real life case studies, news articles and documentary programmes provide opportunities for learners to develop insight into discriminatory practice that can occur and how it should be dealt with. In the external assessment

	learners will be required to analyse given situations or case studies.		
	I can recommend the correct course of action to take – this may be for the practitioner, the individual who requires care or support or the service provider.		
Strategies Conditional Knowledge "I know when to"	NJL & KB Exam Units I know when to illustrate answers will examples. I know when to illustrate examples with the correct amount of depth and detail for the type of question that I am responding to. I know when analysis is required by a question I know when evaluation is required by a question.	NJL Health Safety & Security I know when to illustrate answers will examples. I know when to illustrate examples with the correct amount of depth and detail for the type of question that I am responding to. I know when analysis is required by a question I know when evaluation is required by a question. KB Public Health I know when I need to apply theory and knowledge to real life care settings. I know when to write using a reflective tone and in the first person and when to write in formal essay style. I know when I am required to use references I know when I am required to use relevant examples to assist my explanation.	NJL Health, Safety & Security I know when to illustrate answers will examples. I know when to illustrate examples with the correct amount of depth and detail for the type of question that I am responding to. I know when analysis is required by a question I know when evaluation is required by a question.
		I know when to evaluate and come to a conclusion.	