

Chapelton Academy Y13 Curriculum Intent Plan

Subject: Health and Social Care – Units 8, 20 and 6

Procedural knowledge (exam technique, skills etc):

- a. *Answering extended exam questions (8 & 10 markers)*
- b. *Analysing case studies*
- c. *Communication and presentation skills*
- d. *Collaborative skills*
- e. *Research and referencing skills*
- f. *Understanding the key command words.*
- g. *Report writing*
- h. *Summary note-taking skills*
- i. *Organisation and time-management*
- j. *Self-evaluation skills*
- k. *Revision techniques*
- l. *University and employment pathways*
- m. *Literacy, numeracy & IT skills*

WC	Disciplinary Knowledge	Lesson breakdown	Procedural knowledge progression	RS	HW	Assessment	
1 4 Sept	<p>Inset Monday 4th Y12 12 start Tues Year 13 start Weds</p> <p>Ice breaker activities and course expectations Unit 6</p> <p>Recap of LAA and LAB- Breakdown of criteria to be covered</p> <p>Learning aim C: Carry out work experience tasks to meet set objectives C1 Work experience tasks</p> <ul style="list-style-type: none"> Assisting and participating in clinical tasks (providing direct care for service users as appropriate), e.g. interacting with service users, assisting with meals. Assisting and participating in non-clinical tasks (not directly related to the provision of care for service users), e.g. attending meetings, general office tasks. Promoting person-centred approaches. Importance of supervision in work experience. Using work experience reflective journals to link theory with practice, reflecting on how work experience placement influences own professional development. <p>C2 Work shadowing and observation</p> <ul style="list-style-type: none"> Work shadowing different professionals, as appropriate. Observing specific procedures, as appropriate. Working relationships and agreed ways of working in health and social care. Reflecting on work practice and procedures used within the setting. 	<p>C1 - Lead-in activity: Discuss the content of the unit and how it will be assessed. Recap knowledge and understanding from LAA, LAB</p> <ul style="list-style-type: none"> Tutor presentation: Tutor-led presentation on carrying out work experience tasks to meet set objectives Paired activity: identify person centred approaches within work and discuss the strengths and possible weaknesses of the MANUAL OF ME Whole group activity: Discussion on how work experience placement influences own professional development Plenary <p>C2 - Lead-in activity: Discuss understanding of work shadowing</p> <ul style="list-style-type: none"> Tutor presentation: Tutor-led presentation on observations at work Paired activity: identify a time workplace modelling has worked for learner professionally. When can it go wrong? Whole group activity: Feedback from paired activity – discussion and debate Plenary 	CDEFHIJM	RS to focus on Unit 3 & 4 Unit 8 notetaking and coursework where applicable		QA Feedback Discussion Written answers / whiteboard verbal	<p>Hand out of unit 6 A1</p> <p>LAA</p> <p>LAB</p> <p>LAC</p> <p>WEX working document</p> <p>PLAN and DO sections</p>

	Unit 8						
	Introduction to topic and assessment						
2 11 Sept	Unit 8 A1 The origins and aims of public health policy <ul style="list-style-type: none"> Contributors to public health systems from 1942, e.g. include the Beveridge Report 1942, National Health Service Act 1946, rising public anxiety about the risk of epidemics, e.g. measles. Aims of public health policy, to include: <ul style="list-style-type: none"> planning national provision of healthcare and promoting the health of the population identifying and monitoring the needs of the population identifying and reducing inequalities between groups and communities in society - protecting individuals, groups and communities in society from threats to health and wellbeing that arise from environmental hazards and communicable diseases addressing specific national health problems over a period of time developing programmes to screen for early diagnosis of disease. 	Lead-in activity: Discuss the content of the unit and how it will be assessed. <ul style="list-style-type: none"> Tutor presentation: Tutor-led presentation on historic public health campaigns, e.g. cholera. Paired activity: identify the socio-economic restrictions to health protection for the rural and urban impoverished in 19th century Britain. Followed by feedback to the group. Whole group activity: Discussion on what constitutes public health. Plenary Lead in activity: recap, 'what constitutes public health?' <ul style="list-style-type: none"> Tutor presentation: PowerPoint or other presentation materials to summarise the origins of public health policy. Small group activity: Learners work in small groups to research contributors to public health initiatives. Small group activity: Create a display. Small group activity: Feed back to the group. Plenary 	CDEFHIJM	RS to focus on Unit 3 & 4 Unit 8 notetaking and coursework where applicable	Make notes	QA Feedback Discussion Written answers Presentation verbal	
3 18 Sept	A2 Strategies for developing public health policy <ul style="list-style-type: none"> Strategies, to include identifying the health needs and promoting the health of the population, developing programmes to reduce risk and screen for early disease. Planning and evaluating the national provision of health and social care target setting, to include local and national provision. Minimising harm of environmental factors 	Lead in activity: Tutor introduces topic of government and politics (establish a benchmark for prior learning). <ul style="list-style-type: none"> Tutor-led discussion: session outlining the structure, function and responsibilities of local government institutions for implementing policy (e.g. environmental health inspectors). Tutor-led activity: Tutor to contrast these with structure, function and responsibilities of national government 	CDEFHIJM	RS to focus on Unit 3 & 4 Unit 8 notetaking and coursework where applicable	Learners to create a display poster on screening methods for different disorders.	QA Feedback Discussion Written answers Presentation verbal	

		(e.g. DoH) in drafting and implementing public health policy. <ul style="list-style-type: none"> • Individual activity: Learners to consolidate information with compare and contrast exercise to public health provision in other countries. • Individual activity: Feedback to rest of the group. • Plenary 					
4 25 Sept	A3 Monitoring the health status of the population Sources of information for determining patterns of health and ill health: <ul style="list-style-type: none"> • statistics to include World Health Organization (WHO), government, regional, local • studies to include epidemiological, regional and local reports, demographic data, Public Health Observatories reports on health inequalities to include Black Report 1980, Acheson Report 1998 • how data is used by public health practitioners to monitor and respond to public health issues. 	Lead in activity: recap the role of government in formulating policy. <ul style="list-style-type: none"> • Tutor-led discussion: Tutor introduces topic of disease management. • Guest speaker: Speaker from the care sector to lead a discussion about the importance of screening and the barriers to participation. • Small group activity: Learners to create a display on screening methods for different disorders. • Small group activity: Feedback to rest of group. • Plenary Lead in activity: recap the strategies for developing health policy. <ul style="list-style-type: none"> • Tutor presentation: Tutor introduces key research: Black Report, Acheson Report, Marmot Review. With reference to pattern of health and ill health from a historical and political perspective. • Individual activity: Learners to individually research health inequalities from a sociological perspective, compare research in small groups to consolidate understanding. 	ABCDEFHIJM	RS to focus on Unit 3 & 4 Unit 8 notetaking and coursework where applicable	Learners to use case studies to suggest the reasons why the health of some sectors within the demographic is better or worse than other sectors. Learners to research statistical data on socio-economic and environmental issues to inform their arguments.	QA Feedback Discussion Written answers Presentation verbal	
5 2 Oct	A4 Groups that influence public health policy Key groups in setting and influencing public health policy development: <ul style="list-style-type: none"> • government and government agencies, e.g. 	Lead in activity: recap of health inequalities. <ul style="list-style-type: none"> • Tutor presentation: Tutor differentiates between key groups and introduces terms statutory, pressure 	CDEFHIJM	RS to focus on Unit 3 & 4 Unit 8	Create a PP of info about one of the pressure groups	QA Feedback Discussion Written answers	<i>DATA – 6th October</i>

	<p>Department of Health</p> <ul style="list-style-type: none"> • pressure groups, e.g. Age Concern, British Heart Foundation, Action on Smoking and Health (ASH) • international groups, e.g. WHO, United Nations (UN) • national groups, e.g. the National Institute for Health and Care Excellence (NICE), Cancer Research UK. 	<p>groups and international organisations using PowerPoint or similar delivery device.</p> <ul style="list-style-type: none"> • Individual activity: Learners to research the impact of the WHO on disease control, learners should show evidence of utilising statistical data. • Paired activity: Learners to be given an influential group to research. Learners to feedback on the area of interest of the group and its efficacy in terms of influencing public health policy (this should also consider the impact of contrasting opinions such as pro and anti-smoking groups). • Paired activity: Present findings to the rest of the group. • Plenary 		<p>notetaking and coursework where applicable</p>		<p>Presentation verbal</p>	
<p>6 9 Oct</p>	<p>inset Tues 10th Progress Day Thurs 13th Tutor parents eve Thurs 13th</p> <p>B1 Factors affecting health</p> <ul style="list-style-type: none"> • Socio-economic, e.g. income, education. • Environmental, e.g. housing, access to exercise facilities. • Genetic, e.g. sickle cell anaemia. • Lifestyle, e.g. diet, substance misuse. • Links between social change, lifestyle choices and public health issues, e.g. obesity, cancers. 	<p>Lead in activity: Tutor introduces topic of factors affecting health by establishing baseline understanding</p> <ul style="list-style-type: none"> • Tutor-led discussion: Tutor introduces key terms of genetic, lifestyle, environmental and socio-economic factors. • Individual activity: Learners to create a linking activity game to teach others the cause and effect links between the factor and the disease, e.g. alcohol and foetal alcohol syndrome (FAS). This may take the form of a game of matching pairs game. • Individual activity: Learners to use research on the factor to assess whether the risk can be reduced by intervention to raise awareness, feedback to group. • Plenary <p>Lead in activity: recap lifestyle factors.</p> <ul style="list-style-type: none"> • Tutor presentation: Tutor introduces the topic of social change with PowerPoint or other presentation 	<p>ABCDEFGHIJMNRS to focus on</p> <p>Unit 3 & 4</p> <p>Unit 8</p> <p>notetaking and coursework where applicable</p>	<p>From their research and understanding of the impact of lifestyle, learners should write a case study illustrating how services may be accessed by an individual for a health condition exacerbated by a lifestyle choice.</p>	<p>QA Feedback Discussion Written answers Presentation verbal LAA TEST</p>		

		<p>method to summarise the social changes in British society in the last one hundred years. (Affluence, sexual activity, medical advances etc.)</p> <ul style="list-style-type: none"> • Paired activity: Learners work in pairs to investigate the potential impact of lifestyle on health and suggest links between a specific health issue and lifestyle. Create a 10 minute presentation. • Paired activity: Learners to deliver presentation. • Plenary 					
7 16 Oct	<p>B2 The socio-economic impact of improving health of individuals and the population</p> <ul style="list-style-type: none"> • The social and economic impact of ill health on individuals and the population. • Reduced health and social inequalities through improvements in more disadvantaged communities. • Increased life expectancy, including quality of life. • Reduced demand for or pressure on health and social care services. 	<p>Lead in activity: recap lifestyle choices.</p> <ul style="list-style-type: none"> • Tutor presentation: tutor to use video clips of individuals with health conditions, and PowerPoint or other presentation method to summarise the socio-economic impact of ill-health. • Individual activity: Learners to put together a display on the socio-economic impact of improving the health of individuals with a named condition. • Individual activity: Feedback to group. • Plenary <p>Lead in activity: recap the benefits to wider society of improving the health of individuals.</p> <ul style="list-style-type: none"> • Tutor presentation: Tutor introduces the topic of health and social care provision with PowerPoint or similar medium. • Individual activity: Learners to design a 'guide to services' leaflet including the services available, who provides them. Learners should consider how to make the leaflet 	CDEFHIJM ABGKL	<p>RS to focus on Unit 3 & 4</p> <p>Unit 8 notetaking and coursework where applicable</p>	Coursework	<p>QA Feedback Discussion Written answers Presentation verbal</p>	<p>Hand out U8 A1</p> <p>Tutor to ensure that learners understand how the assignment will be assessed. Tutor to ensure that learners are clear on the deadlines and the assessment</p>

		<p>inclusive for different sections of the demographic.</p> <ul style="list-style-type: none"> • Individual activity: From their research and understanding of the impact of lifestyle, learners should write a case study illustrating how services may be accessed by an individual for a health condition exacerbated by a lifestyle choice. • Plenary 					
23 rd Oct	Holiday						
30 th Oct	<p>31st Oct Y13 Parents Eve</p> <p>C1 The role of health promoters</p> <ul style="list-style-type: none"> • Aims – to improve the health of individuals and the population and reduce health inequalities. • Global, e.g. WHO. • National/regional/local as appropriate to England, Wales or Northern Ireland, e.g.: <ul style="list-style-type: none"> - Department of Health - Public Health Agency - clinical commissioning groups (CCGs) - health professionals. 	<p>Open question, ‘What is health promotion?’</p> <ul style="list-style-type: none"> • Tutor presentation: Tutor to introduce the topic of health promotion and the role of the different health promoters using PowerPoint or similar communication. • Small group activity: Learners to work in small groups to investigate the different approaches to prevention and control of different diseases, communicable and non-communicable, and present findings back to the rest of the group. • Plenary 	<p>CDEFHIJM ABGKL</p>	<p>RS to focus on Unit 3 & 4</p> <p>Unit 8 notetaking and coursework where applicable</p>	<p>Coursework</p>	<p>QA Feedback Discussion Written answers Presentation Verbal</p> <p>LAB Test</p>	
9 6 Nov	<p>C2 Approaches to promoting public health and wellbeing</p> <p>To include both national and local services:</p> <ul style="list-style-type: none"> • monitoring the health status of the community and identifying those most at risk, e.g. children, unemployed, older people, minority ethnic groups • health surveillance programmes • targeted education and health awareness and health promotion programmes • socio-economic support to reduce health inequality between individuals and communities, e.g. winter fuel payments, free school meals, housing support • improving access to health and care services 	<p>Lead in activity: recap the principles of health promotion.</p> <ul style="list-style-type: none"> • Tutor presentation: Tutor to introduce the topic of health risks by PowerPoint or similar medium, supervise a visit to a health centre. • Individual activity: guided research task covering the groups most at risk – children, the elderly, minority ethnic groups and substance abusers – and what they are at risk of. <p>Individual activity: Make notes and reflect on what they have seen.</p> <ul style="list-style-type: none"> • Plenary 	<p>CDEFHIJM</p>	<p>RS to focus on Unit 3 & 4</p> <p>Unit 8 notetaking and coursework where applicable</p>		<p>QA Feedback Discussion Written answers Presentation verbal</p>	<p>Hand in U8 A1</p>

	<ul style="list-style-type: none"> • co-ordinating national and local services • disease registration to inform of health trends and for strategic health planning • statutory duty to notify certain communicable diseases, e.g. measles, tuberculosis. 	<p>Lead in activity: Recap barriers to participation.</p> <ul style="list-style-type: none"> • Tutor presentation: Tutor to introduce the topic of targeted education and health awareness with a PowerPoint or similar mode of communication. • Paired activity: Learners to research data on demography and regional variation for different health disorders and investigate methodology for targeted health promotion. • Whole group activity: Discuss findings with rest of the group and suggest approaches to tackling the health disorders that are linked to lifestyle. • Plenary 					
10 13 Nov	<p>C3 Approaches to protecting public health and wellbeing</p> <p>To include both national and local services:</p> <ul style="list-style-type: none"> • evidence-based responses through environmental surveillance and intelligence gathering • environmental controls, e.g. waste disposal and treatment, water supply, food production, preparation, storage and sales • regulations, control and monitoring of public areas and work environments • the role of microbiology services to identify and control outbreaks of food-, water- or airborne disease • the role of field epidemiology in controlling communicable disease, e.g. pandemic influenza preparedness and response • specific programmes for health protection, e.g. immunisation, health and genetic screening programmes. 	<p>Lead in activity: recap local and national services.</p> <p>Tutor presentation: Tutor introduces the topic of child vaccination.</p> <ul style="list-style-type: none"> • Guest speaker: Health visitor/practice nurse to talk about how vaccination works, when it is administered and why and what the contraindications for administration are. • Paired activity: Learners to research and suggest reasons why children are not vaccinated and what the potential consequences may be for a child infected with a particular disease. Feedback to group. • Plenary 	CDEFHIJM	<p>RS to focus on Unit 3 & 4</p> <p>Unit 8 notetaking and coursework where applicable</p>	<p>Learners to research and suggest reasons why children are not vaccinated and what the potential consequences may be for a child infected with a particular disease. Feedback to group</p>	<p>QA Feedback Discussion Written answers Presentation verbal</p>	

<p>11 20 Nov</p>	<p>Inset Fri 24th C4 Disease prevention and control methods</p> <ul style="list-style-type: none"> Prevention and control of communicable diseases, e.g. guidance on hygiene, BCG vaccination to protect against tuberculosis, use of antibiotics to prevent the spread of bacterial meningitis. Prevention and control of non-communicable diseases, raising awareness of causes, contributory lifestyle factors and the symptoms of, e.g. skin cancer, coronary heart disease. Socio-economic support and protection benefits, e.g. pensions, free school meals. 	<p>Lead in activity: recap vaccination rationale.</p> <ul style="list-style-type: none"> Tutor presentation: Tutor to introduce the topic of disease prevention and control with an emphasis on differentiating between communicable and non-communicable disease and the prevention/management of the contributory factors to the prevalence of the disease. Individual activity: Learners to identify a particular disease and create a poster outlining the causal factors of a named condition and suggesting methods for preventing the spread of the condition or for managing the contributory factors. Whole group activity: group discussion on the problems associated with prioritising disease prevention and management within a restricted health budget. Plenary <p>Lead in activity: recap disease prevention and management.</p> <ul style="list-style-type: none"> Tutor presentation: Tutor to introduce the topic of the principle of social security and the benefits system. Guest speaker: Guest speaker to give insight on the reality of living day to day solely on social security benefits. Plenary 	<p>ABCDEFGHIJM</p>	<p>RS to focus on Unit 3 & 4</p> <p>Unit 8 notetaking and coursework where applicable</p>	<p>Learners to research what different individuals within society would be entitled to and then work out how they would distribute the monthly budget.</p> <p>Allowances could include:</p> <ul style="list-style-type: none"> Personal Independence Payment (PIP) (Disability Living Allowance or DLA) attendance allowance and carers allowance Pension Jobseeker's Allowance (JSA) and low income families. <p>Individual activity: Identify potential impact on maintaining a healthy lifestyle.</p>	<p>QA Feedback Discussion Written answers Presentation verbal</p>	
<p>12 27 Nov</p>	<p>D1 Features of health promotion campaigns</p> <ul style="list-style-type: none"> Relation to health policy. Objectives. Target audience. Reasons for approach – media resources. Ethical considerations. Analysis of data obtained during and after promotion to evaluate outcomes against original objectives. 	<ul style="list-style-type: none"> Lead in activity: learners to try to identify the campaigns from the slogans, e.g. 'Talk to Frank'. Tutor presentation: Tutor to introduce the topic of health promotion policy in the wider social context with consideration given to how different people within society access information. 	<p>CDEFHIJM</p>	<p>RS to focus on Unit 3 & 4</p> <p>Unit 8 notetaking and coursework where applicable</p>	<p>Research a health campaign</p>	<p>QA Feedback Discussion Written answers Presentation verbal</p> <p>LAC Test</p>	

	<ul style="list-style-type: none"> Influence of campaign focus, target audience and ethical considerations on chosen model. 	<ul style="list-style-type: none"> Small group activity: In small groups, and using research data, discuss the different methods of communication health education information that could be used and suggest ways of communicating effectively with hard to reach groups such as: <ul style="list-style-type: none"> o the homeless o substance abusers o transient populations such as travellers etc. Whole group discussion: discuss methods of communication data that would be both effective in their communication and cost effective. Plenary 					
13 4 Dec	<p>Y13 Exams</p> <p>D2 Barriers to participation and challenging indifference</p> <ul style="list-style-type: none"> Cost, e.g. cost of transport affecting access to health services and treatments, cost of exercise facilities, cost of nutritional food. Individual resistance/indifference. Accessibility of resources. Lifestyle factors, e.g. diet, exercise, smoking. The media, e.g. over-exposure leading to public indifference, inaccurate reporting discouraging participation. 	<p>Lead-in activity: Tutor to recap the information from the last session.</p> <p>Tutor presentation: Tutor to introduce learners to some of the reasons why people do not comply with health information and advice.</p> <ul style="list-style-type: none"> Small group activity: Learners to work in small groups and select one of the following reasons for not participating: <ul style="list-style-type: none"> o cost, e.g. cost of nutritional food o individual resistance/indifference o accessibility of resources o lifestyle factors e.g. poor diet, lack of exercise, smoking. <p>Suggest a range of methods for engaging individuals in improving their health behaviour.</p> <ul style="list-style-type: none"> Small group activity: feedback to rest of the group. Plenary <p>Lead-in activity: Tutor to recap the information from the last session.</p>	CDEFHIJM	<p>RS to focus on Unit 3 & 4</p> <p>Unit 8 notetaking and coursework where applicable</p>		<p>QA</p> <p>Feedback</p> <p>Discussion</p> <p>Written answers</p> <p>Presentation verbal</p>	

		<ul style="list-style-type: none"> • Tutor-led discussion: discussion to examine why individuals disengage with public health initiatives or fail to engage with them in the first place. • Individual activity: Learners write role-plays to persuade those at higher risk of health issues within society to adopt healthier lifestyles. This should be related to the principles of effective communication and consider the ethical issues of targeting. • Small group activity: learners to perform role plays. • Plenary 					
14 11 Dec	D3 Models and theories that justify health behaviour change Models and theories to include: <ul style="list-style-type: none"> • health belief model • theory of reasoned action • theory of planned behaviour • stages of change model • social learning theory. 	Lead in activity: Recap the issues surrounding public indifference to health promotion. <ul style="list-style-type: none"> • Tutor presentation: Tutor to introduce the principles of the theories of behaviour change and identify the differences between the models. • Guest speaker: from Alcoholics Anonymous to talk about the 'stages of change model'. • Whole group discussion: consider the problems of trying to apply the models to the health behaviours. • Plenary 	CDEFHIJM	RS to focus on Unit 3 & 4 Unit 8 notetaking and coursework where applicable	Learners to compare and contrast the different models and consider the potential problems of using the models to promote change in the health behaviour of individuals.	QA Feedback Discussion Written answers Presentation verbal	
15 18 Dec	Elf and Social Care D4 Approaches to increasing public awareness of health promotion <ul style="list-style-type: none"> • Health education activities, e.g. healthy eating campaigns, government standards for school lunches. • Social marketing approach – marketing mix, benefits, limitations. • Role of mass media – different forms, benefits, limitations. 	Lead in activity: Recap models of behaviour change. <ul style="list-style-type: none"> • Tutor presentation: Tutor to introduce the topic of behaviour change through health education and national campaigns and outline the principles of social learning theory. • Small group activity: Learners to evaluate a government campaign for effectiveness in attempting to tackle a health issue such as: 	CDEFHIJM ABGKL	RS to focus on Unit 3 & 4 Unit 8 notetaking and coursework where applicable	Coursework	QA Feedback Discussion Written answers Presentation verbal LAD Test	Hand out U8 A2

	<ul style="list-style-type: none"> • Community development approach – holistic concept, participation, empowerment, benefits, limitations. • Two-way communication – in health and social care settings; other uses, peer educators, use of theatre and drama, interactive video and computer packages. • National campaigns, e.g. physical activity, diet, smoking ban, Drink Wise, reduction of teenage pregnancies. 	<ul style="list-style-type: none"> o obesity o bird flu o safe sex o drink driving. <ul style="list-style-type: none"> • Paired activity: With reference to the impact of social learning theory and suggest ways that campaigns could be improved. • Plenary <p>Lead in activity: recap social learning theory.</p> <ul style="list-style-type: none"> • Tutor presentation: Tutor to introduce learners to the role of the media in promoting public health. Consideration should be given to both the benefits and the limitations of using the media to promote public health. • Small group activity: In small groups, learners to use the '4 Ps' of social marketing theory to devise a campaign to tackle a named issue in a specific target group. • Whole group discussion: Discuss potential effectiveness as a whole group. • Mini Plenary <p>Tutor presentation: Tutor to introduce the topic of effective communication and alternative methods of communicating health information.</p> <ul style="list-style-type: none"> • Small group activity: Devise a role-play or short performance for an identified issue and target group. • Plenary 						
25 th Dec	Holiday							
1 st Jan	Holiday							

<p>16 8 Jan</p>	<p>Unit 20 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 <ul style="list-style-type: none"> • The meaning of mental wellbeing and mental health. • Perception of mental wellbeing and mental health. • Mental capital. • The Dual Axis model of mental health. • Measurements and scales which measure mental wellbeing. </p>	<p>LAA What is mental well-being? Power point, tasks embedded</p>			<p>Coursework Make notes on unit 20</p>		
<p>17 15 Jan</p>	<p>Progress Day 2 Tues 16th A2 Factors that affect mental wellbeing and mental health across the life span <ul style="list-style-type: none"> • Environment, endowment and experience. • Socio-economic. • Psychological. • Risk factors. • Protective factors. • Biological factors. </p>	<p>Factors that affect mental well-being Application of knowledge through various documentary clips.</p>					<p>Hand in U8 A2</p>
<p>18 22 Jan</p>	<p>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.: <ul style="list-style-type: none"> • mood disorders • personality disorders • anxiety disorders • psychotic disorders • substance-related disorders • eating disorders • cognitive disorders. </p>	<p>LAB Recognised mental ill-health conditions and their symptoms according to current classification systems Power points and research on ICD and DSMV Peer teach different disorders</p>					

19 29 Jan	B2 Strengths and limitations of classification systems <ul style="list-style-type: none"> • Raising awareness of mental ill health. • Influencing the research agenda. • Labelling and stigmatisation. • The diagnosis of the main depressive disorders. • Atypical presentations. 	Strengths and limitations of classification systems Continuation of power points Case studies/scenario based evaluations						Hand out U20 A1
20 5 Feb	Inset Thurs 8th 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 <ul style="list-style-type: none"> • Psychological and emotional outcomes. • The effects of medication. • The outcomes of psychological treatments. • The use of electroconvulsive therapy (ECT). • Counselling. • Other treatments. • Ethical considerations, to include informed consent. 	LAC The impact of mental ill health on individuals Psychological and emotional outcomes – discussion. Effects of medication – student led The outcomes of treatments – student research on effectiveness						
12 th Feb	Holiday							
21 19 Feb	C2 Mental ill health and relationships How mental ill health might have an impact on the individuals' relationships. <ul style="list-style-type: none"> • 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. 	Recap The impact of mental ill health on individuals ECT, counselling (different types – do round robin), ethical considerations (recap from unit 4). Round robin, analyse therapies. Mental ill health and relationships Teacher led session with students to add notes then apply to scenarios.						Hand in U20 A1

22 26 Feb	Y13 Exams Learning aim D: Examine strategies which promote mental wellbeing and mental health D1 Legislation, policies and codes of practice Legislation must be current and applicable to England, Wales or Northern Ireland, including relevant sections of: <ul style="list-style-type: none"> • Mental Health Act 1983 (amended 2007) • Human Rights Act 1998 • Mental Capacity Act 2005 • Mental Health Act 2007 • Equality Act 2010 • relevant codes of practice • mental health impact of policy and practice. 	LAD Legislation, policies and codes of practice The different types of sectioning Applying relevant legislation to case studies.					
23 4 March	Y13 Exams D2 Assessment and treatment • The assessment of need. <ul style="list-style-type: none"> • The role of professionals in the assessment process. • Benefits of early intervention. • Agreed ways of working. • Person-centred approach. • Approaches to recovery: <ul style="list-style-type: none"> - empowerment of individuals - advocacy - self-management - recognition of individual rights - supporting individuals to adopt and maintain mentally healthy lifestyles. • Addressing inequality. 	Assessment and treatment Power point and documentary about incorrect diagnoses.					Hand out U20 A2
24 11 March	Assignment Workshop	Coursework / Resub opportunities	DEFHIJM ABCGKL	Coursework / Resub opportunities	QA – starter and plenary Discussion – verbal feedback Written answers		
25 18 March	Assignment Workshop	Coursework / Resub opportunities	DEFHIJM ABCGKL	Coursework / Resub opportunities	QA – starter and plenary	Hand in U20 A2	

							Discussion – verbal feedback Written answers	
26 25 March	Bank Holiday Friday 29th Assignment Workshop	Coursework / Resub opportunities		DEFHIJM ABCGKL	Coursework / Resub opportunities		QA – starter and plenary Discussion – verbal feedback Written answers	Hand in U6 A1 LAA LAB LAC (Plan and Do)
1 st April	Holiday							
8 th April	Holiday							
27 15 April	Unit 6 Learning aim D: Reflect on how work experience influences own personal and professional development D1 Reviewing personal and professional development <ul style="list-style-type: none"> • Reflective practice is an ongoing activity. • Theories and frameworks for reflective practice. • Reviewing work experience reflective journal. • Evaluating own performance. • Reflecting on own personal and professional development. D2 Using feedback and action planning <ul style="list-style-type: none"> • The importance of continuing professional development (CPD). • Identifying areas of positive and constructive feedback. • Highlighting areas for improvement. • Creating an action plan for personal and professional development. • Identifying career goals. 	D1 - Lead-in activity: Recap knowledge and understanding from LAA, LAB, LAC <ul style="list-style-type: none"> • Tutor presentation: Tutor-led presentation on reflective practice including theoretical teaching • Independent activity: identify theory that is most relevant to student's own learning and reflection • Paired activity: Compare with peer how the theory influences own professional development within reflective practice • Plenary C2 - Lead-in activity: Discuss importance of feedback (+/-) <ul style="list-style-type: none"> • Tutor presentation: Tutor-led presentation on importance of CPD • Paired activity: Create an action plan for a case study • Whole group activity: Feedback from paired activity – discussion and debate • Independent Activity – create own action plan for personal and professional development. • Plenary 		DEFHIJM ABCGKL	Coursework / Resub opportunities	QA Feedback Discussion Written answers / whiteboard verbal LAA LAB LAC – mini test		

28 22 April	Assignment Workshop	Coursework / Resub opportunities	DEFHIJM ABCGKL	Coursework / Resub opportunities	QA – starter and plenary Discussion – verbal feedback Written answers	Hand out U6 A2 LAD (Reflect)
29 29 April	Assignment Workshop	Coursework / Resub opportunities	DEFHIJM ABCGKL	Coursework / Resub opportunities	QA – starter and plenary Discussion – verbal feedback Written answers	
30 6 May	Bank Holiday Monday 6th Assignment Workshop	Coursework / Resub opportunities	DEFHIJM ABCGKL	Coursework / Resub opportunities	QA – starter and plenary Discussion – verbal feedback Written answers	
31 13 May	Assignment Workshop	Coursework / Resub opportunities	DEFHIJM ABCGKL	Coursework / Resub opportunities	QA – starter and plenary Discussion – verbal feedback Written answers	Hand in Unit 6 LAD (Reflect)
32 20 May	Assignment Workshop	Coursework / Resub opportunities	DEFHIJM ABCGKL	Resub opportunities	QA – starter and plenary Discussion – verbal feedback Written answers	