



Knowledge Organiser:

Year 11 Health and Social Care

Component 3 Health and Wellbeing

A Factors that affect health and wellbeing

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A1 Factors affecting health and wellbeing:

Physical factors:

- o inherited conditions – sickle cell disease,
- o physical ill health – cardiovascular disease,
- o mental ill health – anxiety, stress

- o physical abilities
- o sensory impairments.

● **Lifestyle factors**

- o nutrition
- o physical activity
- o smoking / alcohol / substance misuse.

● **Social factors**

- o supportive and unsupportive relationships with others – friends, family, peers and colleagues
- o social inclusion and exclusion
- o discrimination/bullying.

● **Cultural factors**

- o religion
- o gender roles and expectations
- o gender identity
- o sexual orientation
- o community participation.

● **Economic factors**

- o employment situation
- o financial resources – income, inheritance, savings.

● **Environmental factors:**

- o housing needs, conditions, location

● **The impact on physical, intellectual, emotional and social health and wellbeing of different types of life event:**

- o physical events
- o relationship changes
- o life circumstances

B Interpreting health indicators

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B1 Physiological indicators

- Interpretation of physiological data according to published guidelines:

- o **resting heart rate (pulse)** – normal range 60 to 100 bpm

- o **heart rate (pulse) recovery after exercise** – the heart's ability to return to normal levels after physical activity is a good indicator of fitness

- o **blood pressure** – low blood pressure 90/60mmHg or lower, ideal blood pressure between 90/60mmHg and 120/80mmHg, pre-high between 120/80mmHg and 140/90mmHg, high blood pressure 140/90mmHg or higher

- o **body mass index (BMI)** – underweight below 18.5 kg/m², healthy weight between 18.5 kg/m² and 24.9 kg/m², overweight between 25 kg/m² and 29.9 kg/m², obese between 30 kg/m² and 39.9 kg/m², severely obese 40 kg/m² or above.

● **The potential significance of abnormal readings:**

- o impact on current physical health (short-term risks)
- o potential risks to physical health (long-term risks).

B2 Lifestyle indicators

- Interpretation of lifestyle data according to published guidelines:
 - o nutrition – the Eatwell Guide
 - o physical activity – UK Chief Medical Officers' Physical Activity Guidelines
 - o smoking – UK Chief Medical Officers' Smoking Guidelines
 - o alcohol – UK Chief Medical Officers' Alcohol Guidelines
 - o substance misuse

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C Person-centred approach to improving health and wellbeing

3

C1 Person-centred approach

● **The ways in which a person-centred approach takes into account an individual's:**

- o needs – to reduce health risks
- o wishes – their preferences and choices
- o circumstances – to include age, ability, location, living conditions, support, physical and emotional health.

● **The importance of a person-centred approach for individuals:**

- o makes them more comfortable with recommendations, advice and treatment
- o gives them more confidence in recommendations, advice and treatment
- o ensures their unique and personal needs are met
- o increases the support available to more vulnerable individuals
- o improves their independence o they are more likely to follow recommendations /actions to improve their health
- o they are more motivated to behave in ways that positively benefit their health
- o they feel happier and more positive about their health and wellbeing.

● **The benefits of a person-centred approach for health and social care workers and services:**

- o it improves job satisfaction for health and social care workers
- o it saves time for health and social care services
- o it saves money for health and social care services
- o it reduces complaints about health and social care services and workers

C2 Recommendations and actions to improve health and wellbeing

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● **Established recommendations for helping to improve health and wellbeing:**

- o improving resting heart rate and recovery rate after exercise
- o improving blood pressure
- o maintaining a healthy weight
- o eating a balanced diet
- o getting enough physical activity
- o quitting smoking
- o sensible alcohol consumption
- o stopping substance misuse.

● **Support available when following recommendations to improve health and wellbeing:**

- o formal support from professionals, trained volunteers, support groups and charities
- o informal support from friends, family, neighbours, community and work colleagues.

C3 Barriers and obstacles to following recommendations

● **Definition of barriers:** something unique to the health and social care system that prevents an individual accessing a service. ●

Potential barriers as appropriate to the individual and the recommendation e.g.:

- o physical barriers
- o barriers to people with sensory disability
- o barriers to people with different social and cultural backgrounds
- o geographical barriers
- o resource barriers for service provider
- o financial barriers.

● **Definition of obstacles:** something personal to an individual that blocks a person moving forward or when action is prevented or made difficult.

● **Potential obstacles as appropriate to the individual and the recommendation:**

- o emotional/psychological
- o time constraints
- o availability of resources
- o unachievable targets
- o lack of support

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How do we use Knowledge Organisers in Health and Social Care

How can you use knowledge organisers at home to help us?

- **Retrieval Practice:** Read over a section of the knowledge organiser, cover it up and then write down everything you can remember. Repeat until you remember everything.
- **Flash Cards:** Using the Knowledge Organisers to help on one side of a piece of paper write a question, on the other side write an answer. Ask someone to test you by asking a question and seeing if you know the answer.
- **Mind Maps:** Turn the information from the knowledge organiser into a mind map. Then reread the mind map and on a piece of paper half the size try and recreate the key phrases of the mind map from memory.
- **Sketch it:** Draw an image to represent each fact; this can be done in isolation or as part of the mind map/flash card.
- **Teach it:** Teach someone the information on your knowledge organiser, let them ask you questions and see if you know the answers.

How will we use knowledge organisers in Health and Social Care?

- **Test:** We will do regular low stakes tests to check your ability to retrieve information from memory.
- **Mark our answers:** Once you have done a low stake test you can mark your work using the knowledge organiser.
- **Improve our work:** Once you have finished a piece of work you may be asked to check your knowledge organiser to see if there is any information on it that you could add into an answer.

<u>ASSESSMENT</u>	<u>SECTION ON KNOWLEDGE ORGANISER</u>	<u>DATE</u>	<u>SCORE</u>
Learning Check point 1			
MID UNIT			
Learning Check point 2			
END OF UNIT			