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Inspecting post-16

health and social care

with guidance on self-evaluation

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The post-16 subject guidance series currently comprises: art and design; business education; classics; design and technology; drama and theatre studies; engineering and manufacturing; English; geography; government and politics; health and social care; history; information and communication technology; law; mathematics; media education; modern foreign languages; music; physical education; religious studies; science; sociology.

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Inspecting post-16: health and social care

Introduction

This booklet aims to help inspectors and staff in schools and colleges to evaluate standards and quality in health and social care for students post-16. It complements the *Handbook for Inspecting Secondary Schools* (1999), the supplement *Inspecting School Sixth Forms* (2001) and the *Handbook for Inspecting Colleges* (2001).

This guidance concentrates on issues specific to health and social care. General guidance is in the *Handbooks*. Use both to get a complete picture of the inspection or evaluation process.

This booklet is concerned with evaluating standards and achievement, teaching and learning, and other factors that affect what is achieved. It outlines how to use students' work and question them, the subject-specific points to look for in lessons, and how to draw evaluations together to form a coherent view of the subject.

Examples are provided of evidence and evaluations from college and school sixth-form inspections, with commentaries to give further explanation. These examples are included without any reference to context, and will not necessarily illustrate all of the features that inspectors will need to consider. The booklets in the series show different ways of recording and reporting evidence and findings; they do not prescribe or endorse any particular method or approach.

Inspectors and senior staff in schools and colleges may need to evaluate several subjects and refer to more than one booklet. You can download any of the subject guidance booklets from OFSTED's website www.ofsted.gov.uk.

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OFSTED's remit for this sector is the inspection of education for students aged 16–19, other than work-based education. In schools, this is the sixth-form provision. In colleges, the 16–19 age-group will not be so clearly identifiable; classes are likely to include older students and, in some cases, they will have a majority of older students. In practice, inspectors and college staff will evaluate the standards and quality in these classes regardless of the age of the students.

This booklet concentrates on the most commonly found courses in health and social care for students 16–19: Advanced Vocational Certificate of Education (AVCE) and Intermediate and Foundation level General National Vocational Qualification (GNVQ) health and social care. However, the principles illustrated in this guidance can be applied more widely – for example, in the provision for early years, which most college departments also offer. Inspecting post-16: health and social care

Common requirements

All inspectors share the responsibility for determining whether a school or college is effective for all its students, whatever their educational needs or personal circumstances. As part of this responsibility, ensure that you have a good understanding of the key characteristics of the institution and its students. Evaluate the achievement of different groups of students and judge how effectively their needs and aspirations are met and any initiatives or courses aimed specifically at these groups of students. Take account of recruitment patterns, retention rates and attendance patterns for programmes and courses for different groups of students. Consider the individual goals and targets set for students within different groups and the progress they make towards achieving them.

You should be aware of the responsibilities and duties of schools and colleges regarding equal opportunities, in particular those defined in the Sex Discrimination Act 1957, the Race Relations Act 1976 and the Race Relations (Amendment) Act 2000, and the Special Educational Needs and Disability Act 2001. These Acts and related codes of practice underpin national policies on inclusion, on raising achievement and on the important role schools and colleges have in fostering better personal, community and race relations, and in addressing and preventing racism.¹

As well as being thoroughly familiar with subject-specific requirements, be alert to the unique contribution that each subject makes to the wider educational development of students. Assess how well the curriculum and teaching in health and social care enable all students to develop key skills, and how successfully the subject contributes to the students' personal, social, health and citizenship education, and to their spiritual, moral, social and cultural development. Judge how effectively the subject helps prepare students aged 16–19 for adult life in a culturally and ethnically diverse society.

¹ See Annex Issues for Inspection arising from the Stephen Lawrence Inquiry (Macpherson Report) in Evaluating Educational Inclusion, OFSTED, 2000, p13.

Inspecting post-16: health and social care

1 Standards and achievement

1.1 Evaluating standards and achievement

From the previous inspection report, find out what you can about standards and achievement at that time. This will give you a point of comparison with the latest position, but do not forget that there is a trail of performance data, year by year. Analyse and interpret the performance data available for students who have recently completed the course(s). Draw on the school's *Pre-Inspection Context and School Indicator* (PICSI) report or, in the case of a college, the *College Performance Report*. Also analyse the most recent results provided by the school or college and any value-added information available. When numbers are small, exercise caution in making comparisons with national data or, for example, evaluating trends. For further guidance on interpreting performance data and analysing value added, refer to *Inspecting School Sixth Forms*, the *Handbook for Inspecting Colleges* and the *National Summary Data Report for Secondary Schools*.

Where you can, form a view about the standards achieved by different groups of students. For example, there may be data which enable you to compare how male and female students or different ethnic groups are doing, or how well 16–19-year-old students achieve in relation to older students.

Make full use of other information which has a bearing on standards and achievement, including success in completing courses, targets and their achievement, and other measures of success.

You should interpret, in particular:

- trends in results;
- comparisons with other subjects and courses;
- distributions of grades, particularly the occurrence of high grades;
- value-added information;
- the relative performance of male and female students;
- the performance of minorities and different ethnic groups;
- trends in the popularity of courses;
- drop-out or retention rates;
- students' destinations, where data are available.

On the basis of the performance data and other pre-inspection evidence, form hypotheses about the standards achieved, whether they are as high as they should be, and possible explanations. Follow up your hypotheses through observation and analysis of students' work and talking with them. Direct inspection evidence tells you about the standards at which the current students are working, and whether they are being sufficiently stretched. If the current standards are at odds with what the performance data suggest, you must find out why and explain the differences carefully.

As you observe lessons, look at students' work and talk with them, you should concentrate on the extent to which students:

at Foundation level

- demonstrate their knowledge of health and social care services and how people gain access to them;
- are aware of the main job roles in care particularly those involving direct contact with clients;
- use and correctly interpret health measures;
- organise, formalise and refine their own views in understanding personal development and relationships;
- understand how to plan for health and well-being, including short- and longer-term targets;

at Intermediate level

- reflect on their own performance as carers and identify ways in which to improve;
- identify positive aspects of their own behaviour and how this can impact on a care setting;
- know how to communicate effectively with other care workers and clients;
- understand how the care value base is incorporated into all aspects of care work, its relationship to codes of
 practice and charters, and its impact on the daily work of carers;

- understand the values which influence the way support is provided;
- understand the actions required to minimise hazard in care settings;
- know how to observe and measure physical, intellectual, social and emotional development;
- employ technical terminology correctly in using and reporting measures of health and well-being;
- understand how the principles of human behaviour are acquired;

for the AVCE

- appreciate the ethical issues which arise when balancing the rights of clients with the rights of others;
- understand how policies and equal opportunities legislation are used to promote clients' rights;
- use, describe and reflect on the different communication skills used in interactions with clients, including enhancing and inhibiting factors;
- use and explain health measurements, interpret data and draw conclusions about the physiological status of clients;
- apply their knowledge of the major theories of human development;
- understand the organisation of health and social care services;
- develop their own research topics, including the formulation of hypotheses, select appropriate methodology and review and monitor their research rationale.

1.2 Analysis of students' work

At the beginning of the inspection, it is important to make it clear to the school or college what work you need to see. Students' portfolios are an essential source of evidence for the standards they are achieving, and students and teachers will need time to gather them together. Ask to see work from the full range of attainment of the students following the course(s). Students' assessment records will confirm whether the portfolios selected are a representative sample.

In the time available to you, the scrutiny of two units from each of six candidates should be feasible and provide you with an adequate basis for making judgements on standards.

Looking through the portfolios of individual students will give evidence of the progress they have made and the demands of the teaching. It will inform your evaluation of achievement. Look for evidence of increased sophistication of thought in linking causal factors to outcomes in care situations. Students should show an increasingly clear and detailed understanding of human physiology and health, with the consequences for the individual, family and professionals involved in care.

Example 1: evidence from GNVQ Foundation portfolios in a school sixth form; the students have all achieved 2 D grades in GCSE.

Work on Unit 1: 'Investigating health and social care'.

Higher-attaining student

The student has identified the main jobs in care and stated how they relate to the care value base. She is able to distinguish between national and local services and provides information on informal care provision. She makes very good use of material she gathered when on placement in a home for the elderly, with photographs to show how physical barriers to care can be reduced.

Middle-attaining student

This student has made direct reference to the care value base. He identifies the main jobs of people working in direct care and describes four examples, but does not relate these to the care value base. He has written a good account of the care arrangements for an elderly relative and described the barriers to her care, which include her lack of mobility and fierce independence. The work meets the criteria for a merit grade.

Lower-attaining student

The student has made a list of the care services available in the local area and plotted the locations of the main ones on a map. She describes how clients can self-refer or be professionally referred to the services: she uses as examples the intervention of teachers and social workers. She identifies the job roles of social workers and care assistants. She has written up the notes she took from a group interview with a representative from each service, to give simple but very clear descriptions of their daily activities. The work meets the criteria for a pass grade.

[Attainment well above average (2)]

Commentary

In general, these students show very good understanding of the unit. Even the weakest of them has produced work which shows that she has learnt and applied her knowledge of care settings. If these students are representative of all those taking this course, then attainment is well above average. This points to very good achievement.

Example 2: evidence from GNVQ Intermediate assignments in an FE college; the more capable students achieved 2 grade Cs at GCSE, whereas the least capable has progressed from the Foundation course.

Work for Unit 1: 'Health, social care and early years provision'; assignments examine jobs in early years, health and social care settings.

Higher-attaining student

The work is detailed and demonstrates a thorough knowledge of the roles of a nursery nurse and health visitor, together with an appreciation of the organisations in which they work. The student has included case study information to demonstrate how the care value base is implemented in day-to-day work. It indicates the significance of individual differences between clients. The assignment identifies relationships between codes of practice, charters and the care values relevant to the selected settings. The work meets the success criteria for a distinction grade.

Middle-attaining student

The work is clearly presented and referenced. Correct terminology has been used throughout. The student has generated her own text for the assignment and has clearly demonstrated the relationship of job roles to the workplace. The care value base of the two workers (general practitioner and nursery nurse) has been identified, but the values have been listed and not appropriately contextualised. Codes of practice relevant to the workers have been included but the account of their use is brief. The work meets the success criteria for a pass grade.

Lower-attaining student

This student has not presented the work well. There are shortcomings in the sequence of the sections and how they relate to each other. She has copied much information directly from text books and it is out of date. There is little attempt to identify how the two social care settings (sheltered accommodation for the elderly, and nursery/crèche in the local community) fit into the national framework. The roles of the two workers are adequately described but there is no reference to the care value base underlying their work. The student has not responded to the teacher's comments and the work remains unmodified. It does not meet the success criteria for a pass grade and shows insufficient progress from Foundation level.

[Attainment average (4)]

Commentary

The students show significant differences in their level of understanding of the key points. The quality of research, analysis and presentation also varies considerably, as do effort and commitment. The weakest student's work indicates that she has not successfully bridged the gap between Foundation and Intermediate level. The other students have made good and satisfactory progress respectively. Overall, attainment and progress seem to average out, but it will be necessary to look at other students' work to see how typical these three are.

Example 3: evidence from AVCE portfolios in an FE college; students' previous attainment was a pass in Intermediate GNVQ health and social care.

Unit 9: 'Health and social care provision for elderly clients'.

Higher-attaining student

The student has undertaken work experience in a residential care home and understands the basic role of residential care. She has identified links between this experience and her coursework, although these links are not fully explored. Her description of day-to-day tasks in residential care is clear and sufficiently acknowledges the care value base. The section on comparing and contrasting the impact of social and economic factors on ageing contains no data and is rather rambling. Her care management plan identifies short- and longer-term goals but they are not sufficiently differentiated. The section describing client protection largely consists of imported handouts and contains little original writing. The portfolio is well arranged, demonstrating that she has built on the skills acquired at Intermediate level in managing her portfolio. The student understands how to bring forward key skills evidence.

Middle-attaining student

This student has also had work experience in a residential care home but has not demonstrated that he has applied his subject knowledge to the care setting. His description of job roles in residential care is extremely vivid but contains few references to the care value base. The section on the influence of social and economic factors on ageing contains numerous graphs which the student has generated on a computer. Potentially, these should have been valuable in illustrating points, but there is little written commentary to them. Although the teacher has praised the production of the graphs in her comments, the absence of meaningful commentary is not noted. The care management plan has not been completed. The student has chosen two clients with similar needs and backgrounds, so reducing his opportunities to demonstrate the depth of his knowledge. The section describing client protection has been omitted. The student has presented his work well, particularly in the use of his ICT skills, but his work contains significant gaps and shows no improvement from Intermediate-level work.

Lower-attaining student

The student has not attended work placement in a residential care home. Primary source information has been introduced through an interview with a residential care worker and a presentation given to the whole class on the job role. The student clearly does not understand roles and responsibilities in residential care. She has selected one client for her care management plan and copied a sample plan from a textbook. The section on client protection consists of information on clients' rights rather than protection. The portfolio is scrappy and contains few completed pieces of work. The teacher has indicated where there are gaps in the work but made few comments on the quality of the rest of it.

[Attainment well below average (6)]

Commentary

If these students are typical of the group as a whole, then attainment is well below average and achievement is poor. Only one of the students has improved her knowledge and understanding since the Intermediate course and the teaching has apparent shortcomings in its demands. Practical concepts are more clearly grasped, with less cognitive ability demonstrated at a theoretical level. The students have significant gaps and misunderstandings in their work.

1.3 Talking with students

You may well find that there are lessons or parts of lessons devoted to independent working on assignments. This gives you the opportunity to talk with students to see their attitudes, knowledge and understanding of work in progress. Ask them about previous work to determine how effective learning has been on vocational issues such as the care value base and the factual knowledge required – for example, details of health care provision in the National Health Service.

You should try to arrange a meeting with a group of students outside lessons. This is of most benefit when arranged after the analysis of coursework, when you may be able to interview students whose portfolios you have examined. By doing this, you can ascertain their progress and their current levels of understanding. You can determine to what extent they have planned the research, identified sources of information, based their study on actual care situations and carried out the work themselves.

In health and social care, some students may believe that the quantity of information presented as coursework is significant. This may lead to wholesale copying from sources, with consequent poor learning. The interview with students will allow you to judge the depth of understanding and the scope of the knowledge they have gained through the work. Avoid general questions, other than for 'ice-breaking' purposes. The time is best used in asking specific questions related to the content of previous units or in following up issues identified in your analysis of the work of particular students.

Example 4: evidence from discussion with 3 Intermediate GNVQ health and social care students in a school sixth form; they started the course with about four grade C passes at GCSE.

Discussion on Unit 2: 'Promoting health and well-being'.

From the group of seven students the three whose portfolios have been scrutinised attend the 40-minute interview. Three questions have been identified from each student's work and one of these questions, concerned with emotional factors affecting health, is common to all three. Two of the students are judged to be attaining at distinction level according to the records provided by the course co-ordinator; the remaining student is judged to be achieving a merit.

All the students can distinguish fluently between social and emotional factors affecting health. One student, asked about planning for improving health, gives a very good description of the time-scales and targets involved (merit), clarifying some details in the written account. A second student gives lucid descriptions of a range of health promotion materials collected. These two have a pragmatic grasp of the difficulties that can arise between the drawing up of a health plan and its implementation. The remaining student (merit) is less articulate when discussing the same problem. She is, however, able to explain verbally matters that were less intelligible in her written account, such as her evaluation of fitness plans.

All are well able to point out shortcomings in some commercial material and to describe which would be most useful for a particular client. In all cases, the students are able to give a very clear oral account of areas of work presented in the portfolios. All can explain how they would evaluate fitness plans and measures to identify difficulties and suggest improvements. All three students are imaginative in the way they have opted to present their health plans. They have used key skills very well in their recording of measures of health.

[Attainment well above average (2)]

Commentary

The students' capacity to recall and explain what they have learnt shows that their abilities are being realistically assessed. The two deemed to be achieving at distinction level demonstrate very good understanding of technical terms. Their written work is fluent and shows synthesis of information. The least able of the three shows a good understanding of many of the ideas. Since even the lower-attaining student (that is, lower attaining in relation to this class) reaches merit level, this is attainment which is well above average. In view of their potential on entry to the course, this attainment suggests good achievement.

Example 5: evidence from discussion with 4 Year 12 AVCE students in a school sixth form (mid-autumn term).

Unit 2: 'Communication in health and social care'.

All four students have progressed from an Intermediate course in which they achieved pass levels. They are working together to compile evidence of group interaction. They are asked what methods they are going to use to demonstrate their communication skills, what records they plan to produce and what the context of the session is to be.

The group is lethargic and inhibited, finding difficulty in explaining the above factors. They are not able to use effective language to describe non-verbal communication. They find it difficult to explain to each other perceived barriers to useful communication within the group. They have problems deciding how to record their findings, and are poorly prepared, with no perceived context for discussion. This is despite written and oral guidance from the teacher at the start of the lesson and reference to recent homework.

While they have adequate basic understanding of the subject, their lack of confidence prevents them from progressing. None of them can explain to a satisfactory level why effective communication is fundamental within a health and social care setting. They do not fully understand the concept of evaluating their own communication skills and those of their peers.

[Attainment below average (5)]

Commentary

It is clear that the students have found the AVCE bias towards more independent learning hard to grasp. They have not yet been successful in making the leap from a small communication content in Intermediate Unit 1 to that of a whole unit in the AVCE. Their attainment is below average and this suggests that their achievement is unsatisfactory.

1.4 Lesson observation

Lesson observation is a major source of information about standards and achievement. As well as direct teaching, lessons may consist of students working alone or in groups on research, or the production of a particular piece of coursework, and teachers may hold discussions with individual students.

Example 6: evidence from a Year 12 AVCE health and social care lesson in a sixth-form college; a group of students recruited to the course with 5–6 grades A–C in GCSE.

Unit 1: 'Equal opportunities and client rights'.

At the beginning of this unit, the standards of attainment relate well to criteria for grades A to C. Students have brought higher skills from other units to bear on this early work on Unit 1. There is clear evidence of the students' developing ability to relate knowledge and understanding from the course to their work placements and vice versa. For example, they understand the need for different members of staff to access confidential information in a doctor's surgery and how this is achieved.

When the students are asked questions probing Grade A assessment evidence – for instance, about evaluation of effectiveness of equal opportunities legislation – most are able to provide well-considered responses. Oral skills are above average for the end of Year 12. Progress is good in this lesson, with students covering and showing good understanding of the content of the unit. They use specialised vocabulary accurately and with confidence. They interact well and in discussion sometimes build on what others have said. There is a warm rapport with the teacher and respect for each other. The students show interest and maintain concentration throughout the lesson. They are able to give a good account of what they have learnt and how it relates to their work placements. Given the starting point of their GCSE grades on entry, this indicates good achievement.

[Attainment well above average (2)]

Commentary

Most students give responses to questions corresponding to the assessment evidence criteria for A grade, which means that attainment is thus judged to be well above average at this stage. This points to good achievement.

2 Teaching and learning

2.1 Evaluating teaching and learning

Interpret the *Handbook* criteria with specific reference to health and social care, and keep in mind the characteristics of effective teaching and learning in which:

- through the teacher's knowledge and enthusiasm for the subject, students come to appreciate the significance of care provision both in familiar and in unfamiliar settings (subject knowledge, planning, methodology);
- students gain experience and develop their skills in a variety of appropriate care settings (expectations, planning);
- the development of practical caring skills is integrated with the theoretical knowledge on which they are based (methodology, subject knowledge, planning);
- the specialist input of current care practitioners gives an insight into their work (expectations, resources, subject knowledge);
- teachers provide positive reinforcement of the care value base through their interactions with students (expectations, methodology);
- stereotypes are discouraged and students learn that individuals are affected by differing factors which influence their needs (*planning*, *subject knowledge*);
- students are encouraged to make judgements and predictions about the potential effects of care (expectations, planning, assessment);
- students are encouraged to reflect on their own communication and behaviour in order to improve their performance in care settings (*expectations, planning, assessment*);
- students learn to use technical terminology in relation to using and reporting measures of health and wellbeing (methodology, assessment).

Learning will be effective when students:

- develop their ideas beyond simple responses and bland statements, showing that they are continuously being extended – for instance, moving from an accurate description of the different types of client abuse to a critical examination of the range of issues and the reasons behind the abuse of clients (developing ideas and increasing understanding);
- read independently about health and social care, bringing relevant material into lessons for discussion and using it in their coursework (*intellectual effort*, *interest*);
- use appropriate terminology for the health and social care field, giving due care to the client group, the context, and whether it is written or spoken communication (*increasing understanding*);
- appreciate the importance of accuracy in the use of health and social care vocabulary, technical terms and non-discriminatory language (*increasing understanding*);
- build on their work placement time to relate practice to theory, sharing their experiences in different care
 settings to broaden one another's understanding (thinking for themselves, understanding how well they have done).

Be alert to teaching which may have superficially positive features but which lacks the rigour, depth, insights and the command of good subject teaching. Examples might be lessons in which:

- anecdotal evidence of behaviour witnessed on placement is discussed, but without examining the concepts which underlie it (methodology, expectations);
- group work makes good use of presentational skills but involves little subsequent analysis (*methodology, subject knowledge*);
- information and communication technology (ICT) is used extensively but in such a way that it does not contribute to increasing knowledge, skills and understanding of care planning (methodology, resources, planning);
- work placement is organised, but students are poorly briefed about its purpose and where it links to coursework or examination requirements (*planning, expectations*);
- large quantities of information are provided in the form of handouts but students are not clear how to use them and have little opportunity to think or reflect on what they are doing (resources, planning, methodology);
- there is a brisk pace of working but the students are not given time to think sufficiently for themselves (*planning, methodology*).

2.2 Lesson observation

Lessons may consist of individual work on research or the production of a particular piece of coursework, and you should not encourage teachers to put on special events for your benefit. Take whatever opportunities you have to evaluate the teaching and learning. Observe the students while they are working and question them on what they are doing and how they are going about it. Their use of resources and evidence of study skills will inform judgements about learning. You will make your judgements on the teaching from the appropriateness of the task(s) set and the way in which the teacher manages the classroom activity, monitors the students, and engages with them as necessary.

Example 7: evidence from an Intermediate GNVQ lesson in an FE college (summer term).

Unit 3: 'Understanding personal development'.

This lesson is focused on the effect of discrimination and bullying on self-concept and human development. Students watch a video made up of three situations (two in hospitals and one in a nursing home). The section set in the nursing home shows covert discrimination against a homosexual man and overt discrimination against a woman who seems 'short tempered and unreasonable'. The teacher explores how stereotyping interferes with the understanding of people as individuals, and introduces the concept of multifaceted relationships. One student brings in the issue of racism linked with discrimination. Students make good-quality notes of important points from the video and are successful in relating consequences to actions. In groups, they share their observations and discuss solutions to the problems seen in the video. Students then collaborate well in using ICT to write up thorough and lucid accounts of all three situations, with the purpose of sharing learning with other groups.

The activity is well planned and the video is well chosen and matches the requirements of the unit 'Understanding personal development'. The teacher sets out the purposes of the lesson clearly to the students and introduces the video in the context of the whole lesson. She makes good links with knowledge and understanding in Unit 2 (previously studied) 'Promoting health and well being', particularly the emotional and social aspects. She also acts as an agent provocateur, challenging ideas, and this is effective in provoking further discussion amongst students. On several occasions, she brings new information to the debate – for example, from her own experience of working in residential care – and she transfers ideas and experiences from one group to the other.

The teacher handles sensitive issues with care and gives no negative messages. At no time do the students appear embarrassed or out of their depth. Skilful use of questions shows that the teacher is aware of different students' capabilities, and she ensures that all are able to participate.

The students clearly enjoy the intense debate. They concentrate throughout the lesson, listening actively to others' views and readily joining in group and class discussions. They show realistic judgements about the situations seen in the video.

[Teaching and learning very good (2)]

Commentary

The lesson succeeds very well because the students know what is expected of them and are building on previously acquired knowledge. They are aware of the principles behind the topic and, from the recently studied unit, they know something of the different factors affecting an individual's health and well-being. They show commitment, having respect for one another's and the teacher's opinions. The lesson has been constructed in a rigorous and creative manner, geared to the ability of the students and with regard for their group dynamics. The format of the lesson is appropriate for the maturity of the group. They are able to learn effectively because they feel secure and are thus able to take part with confidence.

Example 8: evidence from a GNVQ Foundation lesson in an FE college (autumn term).

Unit 2: 'Understanding health and well-being'.

This lively lesson is the introductory session for the unit. It begins with a short video recording of 'Wayne and Waynetta', a comedy programme about two young people who have a very unhealthy lifestyle. A very well-chosen resource – the students find it highly amusing and enjoy it enormously. They then form small groups in which they identify as many factors as they can, showing why the lifestyle was so unhealthy. The teacher allows a short period of discussion in the groups before bringing the class together to share their points. She skilfully directs students to less obvious issues – for example, the quality of their diet rather than just its quantity. Students then divide into two groups, one for each character, and begin to identify how their lifestyle could improve. The teacher ensures that each group examines factors relating to environment, diet, personal hygiene and exercise. Most students contribute very well and in doing so show how far they have understood the main ideas. By the end of the lesson, each group has identified the major factors and is very well prepared to be introduced to health planning in the next lesson.

[Teaching and learning very good (2)]

Commentary

This very well-planned lesson succeeds because it captures the imagination of the students, moves at a brisk pace and provides a very good basis for the lessons to follow. The teacher is confident and skilful and has very clear expectations of the students. They readily demonstrate their ability to observe and to draw conclusions from what they observe.

Example 9: evidence from a Year 12 AVCE health and social care lesson in a school sixth form.

Unit 1: 'Equal opportunities and client rights'.

The class starts with a review of previous learning on equal opportunities and discrimination. This is effective in focusing the students on the topic. The lesson is introduced as concerning ethical dilemmas and moves on to develop knowledge and understanding of the importance of confidentiality in the care setting. The teacher takes particular care to introduce and check the understanding of vocabulary relating to the topic. For example, the 'ethics' discussion results in a working definition which relates to the GNVQ unit description; 'privacy' and 'confidentiality' are discussed, distinguished between and related to the care values base needed to support client rights and responsibilities.

The teacher makes very effective use of questions and answers with the whole group, engaging them in discussion and using individual and small group work to elicit ideas for use with the whole group. The students respond well, showing keen interest and making good contributions. Rapid gains in understanding are evident. All members of the group are involved, with the teacher having a one-to-one talk with the quietest member of the group. There is a summarising session at the end of the lesson before homework is set. This involves the preparation of an imaginary case study of a work setting, illustrating the difference between practice, procedure and legislation – a good activity, well chosen to advance their learning. Time is given to making sure that all students fully understand what is expected of them.

The teacher's knowledge and experience of the subject are very good. Examples used for discussion, such as the policy statement from a social services department, are drawn from actual care settings. The written materials are realistic – such as the case studies used as contexts in which students apply the knowledge learned in the lesson. As a consequence, students are involved in genuine decision-making in their discussion with others, and their learning progresses very well.

There is a seamless move from related topics to the indeterminate regions of ethical dilemmas and confidentiality. Students are helped by the teacher's references to current topics in a television soap opera. Again, this good choice is effective in engaging the students' interest and developing their understanding, as they are encouraged to explore these topics intellectually. The students understand how different units are interlinked, and clearly enjoy grappling with new concepts and theoretical situations. Several students relate these to their work experience. They discuss this with due regard to confidentiality and clients' rights, demonstrating that they are familiar with the importance of the care value base.

[Teaching and learning very good (2)]

Commentary

The lesson is very well planned. It follows on well from previous work and the importance of ethics and confidentiality in the care setting is made very clear. Throughout the lesson, the teacher makes good reference to care settings, and students are encouraged to give their own views related to the care settings in which they work. They are closely involved and interested in the cases being considered. There is variation in methodology. Much of the lesson is based on questions and answers, but there is paired work to elicit ideas on the levels of confidentiality appropriate to different situations. This is effective in producing very good learning because it continues to hold the students' interest. The teacher clearly summarises the lesson and sets homework on personal values. This is in preparation for a subsequent lesson to consider how these affect/relate to the care situation. Students learn new concepts easily in this teaching environment.

Example 10: Evidence from a Year 12 AVCE health and social care lesson in a school sixth form (summer term).

Unit 3: 'Physical aspects of health'.

The lesson topic is homeostasis. The course leader has a home economics background and has asked for support in teaching this unit, which is rich in biological knowledge. For preparation, students have been asked to read a section on kidney structure and function from an A-level textbook. The teacher's knowledge of human physiology is of a high standard and she clearly understands complex homeostatic mechanisms. However, she asks no questions at the start of the lesson and launches straight into an accurate account of the structure and function of the kidney, using OHTs.

Students are quiet throughout the lesson and few raise questions. Those raised are to ask for an explanation, but this only results in a repetition of the information from the teacher. Students are clearly determined to record what is being said in as full a way as possible, but the order, completeness and usefulness in the notes they make vary widely. At the close of the teacher's description, students are asked to make their own notes using the text they have read and the jottings they have made during teacher's exposition.

After the lesson, students were unable to respond well to my questions on heart structure or on the cardiovascular system covered previously by the same teacher in this unit. They had asked for explanations outside the lessons but had simply been given page references in the A-level text. Students' notes on the previous topic were accurate but not understood by many of them. One student described how they had complained to a tutor about the lessons with this teacher but 'nothing was done'.

In interview, the teacher described her lack of understanding of the GNVQ course and her view that it was her role to provide correct biological information.

[Teaching and learning poor (6)]

Commentary

The teacher's knowledge of the content was good but, beyond that, her teaching was poor. She did not respond appropriately to students' requests for help. Since they did not understand the textbook and teacher's notes the first time, further reference to texts was not likely to overcome their problems. The teacher did not ascertain the students' level of knowledge and understanding before starting to teach, nor did she check their understanding along the away by asking suitable questions. Consequently, students' learning was constrained and restricted to lower levels of understanding. The students had tried to learn and change the teaching régime but staff had not responded adequately. Students maintained good behaviour despite their problems and should receive credit for their positive attitudes.

Example 11: evidence from a GNVQ Intermediate lesson in a school sixth form (summer term).

Unit 3: 'Understanding personal development and relationships'.

This lesson is devoted to the completion of portfolio evidence for the unit. The students have been well prepared for the lesson and have brought their portfolios with them. An additional tutor has been provided for the lesson, to help students with their communication skills. Students work in the learning resource centre to acquire additional information or use computers to improve the presentation of their work. The teacher and the support worker spend time with individual students as they continue with their work. The quality of their advice and support is good. However, students do not keep to task for the whole lesson. Those students who use the computers tend not to use them productively and some students spend too much time copying material from books. At the end of the lesson, some students have improved their portfolios but many have made little progress.

[Teaching satisfactory (4); learning unsatisfactory (5)]

Commentary

The lesson has a clear purpose, the teacher has prepared the class in advance and has arranged for an additional tutor to be present so as to give as much individual attention to students as possible. A range of learning resources is available. The teacher has made appropriate provision for an activity which is an important part of courses like this. However, students' attitudes are such that the task of completing the portfolio evidence is not sufficient to stimulate all of them into productive work and it is clear that many have failed to respond to the challenge. Although some students clearly benefit from the session, others fail to produce satisfactory work, so that learning is unsatisfactory overall.

2.3 Other evidence on teaching and learning

Lesson observation is usually the most important source of evidence on the quality of teaching and learning, but the analysis of work and discussions with students can also yield valuable information. This is particularly important when the work includes a coursework component undertaken over time. Under these circumstances, the observation of individual lessons may give a very partial picture of the students' learning experience and of the support provided by teachers.

The work analysis will give you a good feel for the overall rate of progress, and therefore the pace of the teaching and learning. It will show the range and depth of the work which the students are required to do. For example, it will indicate whether students use an adequate range of care contexts and whether they are challenged sufficiently to develop the higher order skills of analysis and evaluation.

Discussions with students will give you a sense of their motivation and the range of their experiences. You can ask questions to show whether they understand clearly how well they are doing and what they must do to improve.

3 Other factors affecting quality

Other factors are only significant if they have a noticeable impact on standards, teaching and learning. Note and evaluate any significant features of the curriculum, leadership, management, staffing, accommodation or resources.

Management

Portfolios of evidence of learning take time to build and need sound guidance, particularly at the start of a GNVQ programme. Consider the management of this aspect of the students' work and how their learning is affected by the guidance they receive. Do they benefit from regular advice on the development of their portfolios? Are students preoccupied with their portfolio construction to the detriment of their learning?

How good are the schemes of work and how well are assignments designed? Poorly designed assignments may be insufficiently challenging. For example, students may transcribe material from textbooks, computers or information leaflets, with little analysis of the contents.

You may find cases of common subject teaching, when schools or colleges bring together students from different levels and programmes. Such common teaching may include: Foundation with Intermediate level GNVQ; an AVCE unit on behavioural psychology with A-level psychology; GNVQs with NVQ programmes in colleges. If this takes place, it will be important to check that the teaching is appropriate for all levels of students' understanding.

Mature students are often included on college courses. Some of them will have relevant paid, voluntary or personal practical experience of health or social care. Consider whether teachers recognise them as a valuable resource, encouraging their interaction while moderating their enthusiasm. Are there opportunities for them to extend their knowledge and understanding? Are they permitted to monopolise discussions? Often such students require individual slants to assignments in order to maximise their newly acquired knowledge and relate it to their past experience in a valid way.

Consider the impact of the way different units are time-tabled. Does the allocation of different units to different teachers, or to different periods of time, result in students failing to understand the relationships between the topics covered by different units? Are teachers successful in bringing out these connections?

Staffing

The importing of 'specialist' teachers is not always successful because they may not have an overview, and so be unable to relate the immediate study to knowledge and understanding from other parts of the course. When specialists are being used to teach parts of the course, consider how well they understand the importance of the vocational context and whether the course leader has ensured that they are using effective methods of teaching.

Curriculum

Contact time is often relatively low on GNVQ and AVCE courses. Consider how well the non-contact time is used. Does it have clear purposes and targets and is it monitored systematically by staff so that good learning takes place at these times?

The way health and social care may be time-tabled can result in half-day blocks of time being allocated to its teaching. Is there variety of activities during such blocks of time to stimulate interest and maintain the application and motivation of students?

Inspecting post-16: health and social care

4 Writing the report

The following are examples of post-16 subject sections from inspection reports. The first example illustrates provision in a school sixth form. The second example refers to provision in a large general further education college, where there is a broad range of provision in early years, health and social care. (The examples do not necessarily reflect the judgements in any or all of the examples given elsewhere in this booklet.) The summative judgements in these reports use, for schools, the seven-point scale: *excellent; very good; good; satisfactory; unsatisfactory; poor; very poor.* For colleges, there is the five-point scale: *outstanding; good; satisfactory; unsatisfactory; very weak.* The summative judgements *excellent/very good* used in school reports correspond to *outstanding* in colleges; *poor/very poor* used in schools correspond to *very weak* in colleges.

Health and social care

Overall, the quality of provision in health and social care is good.

Strengths

- Standards of attainment are above average on the GNVQ Intermediate course and have improved for AVCE; achievement is good on both courses.
- Teaching is good overall: lessons are effective and well planned.
- Teachers are well qualified and experienced in the health and social care field.
- There is strong leadership of the subject.

Areas for improvement

- Work placements are not well managed, so that some students do not have sufficient opportunity to develop their practical skills.
- Some texts and reference materials are dated and need replacing

Both the GNVQ Intermediate and AVCE courses in health and social care were inspected. The number of students has increased by 100 per cent in the three years since this provision was introduced.

Overall, standards are above average. The most recent grades for health and social care at AVCE are slightly above the national average, which is an improvement on the previous year, when they were well below. A good percentage of the students have gained merits and distinction, and all who started the course are continuing with it. Last year only 65 per cent of the students who began the course completed it. The success rate at GNVQ Intermediate level has been 100 per cent, with 70 per cent of students achieving merit and distinction grades. Despite strenuous efforts, the school has failed to attract more than a few male students to these courses.

GNVQ Intermediate students have above average previous attainment for this course. Most students possess three grade Cs at GCSE and are studying additional GCSEs with the GNVQ. From this firm base, their achievement is good. Their attainment levels are above average and the portfolios of evidence which they produce are thorough and well presented. The number of students predicted to achieve merit and distinction grades this year is high. First year students on the AVCE have made a good start to their course. A comparison of their coursework with their GCSE grades shows that they are achieving well. The consultative style of teaching is new to them and they find it refreshing. Their critical abilities are superior to those usually found at this stage of the course. Second year students understand the fundamental concepts of health and social care. They state that they found their first year testing because of staffing problems, and are consequently learning more in their second year. They manage their learning independently and can identify their weaknesses. Their current coursework is much improved on that collected in their portfolios last year and indicates good achievement. Their standards are now above average.

Teaching is good overall, mainly because of methodical planning, good subject knowledge and strong teamwork. Theory and practice of health and social care are well related, giving students realistic insight into the demands of the sector, enabling good learning.

The enthusiasm of the teachers creates a positive environment for learning. Students bring ideas from outside into the classroom, readily exchanging ideas and views with their peers and teachers. For example, second year AVCE

students reported perceptively on a television programme about healthy eating, which they had seen at home. They have a sound grasp of principles and are making good progress in a supportive environment. They appreciate the freedom they are given to pursue independent study, and realise that this is only effective because of the clear structure that encompasses it. They are attentive and lively, and have a positive attitude to class work. They listen carefully to lessons, and say that they find the content of most relevant and interesting. They are practised in discussion and, with a few exceptions, join in readily, through the effective encouragement of their teachers.

Assessment is continuous and largely appropriate. Assignments are usually graded as units are completed. Students benefit greatly from the support they get from their teachers, both in and outside lessons. Weekly tutorials provide valuable information on opportunities after leaving school, as well as continuing support for academic and social development.

Teachers are well qualified. Their subject knowledge is good and those teaching practical knowledge have relevant past experience. Good use is made of the input of specialists from other departments. Students have access to an adequate supply of supporting texts and references. Some of the stock is dating rapidly, however, and will need to be replaced in the near future.

Leadership and management are good. The recent improvement in standards is directly attributable to changes in the management of the subject. A new co-ordinator has been appointed. With his colleagues, he has developed minimal but effective recording systems. Resources are well catalogued, teaching approaches are discussed, and students' work is tracked and documented. It is clear that the morale of the teaching team is buoyant, and that improved learning and teaching have followed the new initiatives. The staff work together constructively, helped by a computer network which allows them access to relevant data and resources. They have time to prepare and grade work, as they have access to administrative help for several hours a week. Students' work experience is arranged centrally in the school. Teaching staff carry out regular monitoring visits but they have little say in the selection of placements. This has resulted in some students being provided with placements where they cannot develop their practical skills successfully.

Health and childcare

Overall, the quality of provision is satisfactory.

Strengths

- There is a broad range of appropriate provision.
- Most lessons are well planned and make good use of a variety of activities.
- Work experience is well organised and effective.
- There are good levels of support for learners.

Areas for improvement

- Advanced-level students' skills of critical analysis and evaluation are not as well developed as other skills and understanding.
- There is a low level of retention on the CACHE diploma course

Scope of provision

The college offers a broad range of full-time and part-time health and childcare courses. It is a lead member in a local partnership providing support and assessment for NVQs in care, childcare and playwork. Trainees who undertake modern apprenticeships work towards NVQs at levels 2 and 3 in care or early years care and education. Care trainees are employed in residential homes and trainees in childcare are employed in nurseries and day-care centres. The college has recently expanded its provision of part-time courses in first aid, access to health, and counselling. It has successfully introduced courses in health and childcare for black Caribbean male students. These have recruited large numbers of students. The access to health programme offers considerable flexibility in attendance patterns. Students can enrol at three different points within the year and can complete the course over one or two years.

Standards and achievement

Standards overall are average. Examination results in most courses are close to the national average. There are high pass rates on first aid courses and on the Foundation course in counselling. The proportions of students achieving passes and higher grades on the Intermediate GNVQ health and social care course are above the national average. On these courses, students are achieving well in relation to their previous attainment. Pass rates on a few other full-time courses have dipped slightly from average to below average. For example, the pass rate for the BTEC National Diploma in childhood studies fell from 100 per cent in 1999 to 77 per cent in 2000 and that for the AVCE health and social care course fell from 76 per cent to 43 per cent over the same period. The proportions of higher grades achieved on the AVCE course and on units of the BTEC National Diploma course are close to the average. Retention rates are either at or above the national average for the majority of courses, although on the CACHE diploma in childcare retention has been well below the national average for three years. Over the last few years, a large number of NVQ students and trainees have not completed the qualification they were seeking. The shortage of qualified assessors in the workplace has slowed the process down. However, during the current year, this situation has shown considerable improvement and the completion rate of NVQ units is now satisfactory.

The work of current students is average in most respects and students' portfolios and work in class indicate satisfactory achievement. Most students on Intermediate-level courses demonstrate good knowledge, understanding and practical skills. In a childcare lesson, students had produced number games which they had used with children while on placement. They evaluated how successful they had been and used their evaluation to build on their knowledge of the development of cognitive skills. GNVQ Intermediate health and social care students used role-play to illustrate good and poor care practice, demonstrating sound understanding of the care value base. Advanced-level students show a sound understanding of the basic concepts of care and their practical application, including the production of carefully designed care plans for clients. Their skills in critical analysis and evaluation, although satisfactory, are not so well developed. Students' written work is well organised and presented.

Quality of education

Teaching is satisfactory overall; some of it is good. The best lessons are well planned and make good use of a variety of activities, including exposition, question and answer, group work and role-play. As a result, students are enthusiastic about their lessons and work at a good pace. All teachers are knowledgeable and provide regular opportunities for students to contribute. They are particularly effective at encouraging the least confident students to participate in role-play. They make good use of high-quality handouts and overhead transparencies to support their teaching. Students are attentive, work productively and respond positively to the different styles of learning they experience. However, in a small minority of lessons learning is not managed well. Teachers make insufficient checks on students' learning and fail to ensure that the more capable students are fully stretched. In one lesson, group work was dominated by the more vocal students and, as a consequence, some more passive students in the group did not benefit from the exercise. On advanced courses there is insufficient emphasis on students' analysis and evaluation.

Assignments are clearly outlined and relevant to health and childcare practice. Teachers' comments on written work are helpful and constructive. Students are prepared well for work placement and value the experience it provides. The benefit to their understanding which students derive from their work placements is evident in the many perceptive references in portfolios to their practical work. Teachers maintain good contact with placement providers and carefully monitor and record students' progress in the workplace. Placements are arranged in primary schools which have significant numbers of children on roll from minority ethnic communities. These improve all students' awareness of ethnic diversity, as do sensitively-led discussions which draw on the cultural diversity within the classes.

Students speak highly of their supportive relationship with their teachers. All full-time and part-time students are allocated personal tutors and meet regularly with them. Students' attendance is monitored rigorously. Parents and guardians receive regular reports on students' progress. Work-based trainees' individual training plans are reviewed and updated on a regular basis.

Teachers are well qualified and most have relevant specialist and vocational experience. All assessors have achieved appropriate assessor qualifications. Most accommodation is good. The majority of courses have base rooms which have been imaginatively refurbished and contain attractive displays of students' work – students feel encouraged to

see that their work is valued. There is a well-used learning workshop for science and health courses. This includes an IT 'drop in' facility. Specialist equipment and library facilities are adequate; there is a small but generally up-to-date selection of books and specialist journals.

Leadership and management

Leadership is generally good. There is an awareness of the need to improve further the quality of teaching and learning, and this is beginning to take effect. A recent review has indicated the need to improve the management of learning in some lessons. Staff are encouraged to participate and put forward recommendations for improvement. There are regular team meetings which concentrate upon key issues, such as monitoring the achievement of different groups of students, and improving students' attendance and retention, curriculum review and development. Action plans arising from the self-assessment process contain clear strategies for improvement and are monitored carefully. The department has recently drawn up a scheme for improving the skills of Advanced-level students in critical analysis and evaluation. On work-based training, there is effective liaison between employers, work colleagues and the college co-ordinator.

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