

Specification

DRAFT

Cambridge Advanced National in Mental Health: Individuals & Society

**OCR Level 3 Alternative Academic Qualification
Cambridge Advanced National in Mental Health: Individuals & Society**

**Certificate H098
Extended Certificate H198**
For first teaching in 2026

Version 1.0 (April 2025)
ocr.org.uk/cambridge-advanced-nationals

Tell us what you think

Your feedback plays an important role in how we develop, market, support and resource qualifications now and into the future. We want you and your students to enjoy and get the best out of our qualifications and resources, but to do that we need your honest opinions to tell us whether we're on the right track or not.

You can email your thoughts to support@ocr.org.uk or visit our [feedback page](#) to learn more about how you can help us improve our qualifications.



Designing and testing in [collaboration with you](#) and your students



Helping young people develop an [ethical view of the world](#)



Equality, diversity, inclusion and belonging (EDIB) are [part of everything we do](#)

Are you using the latest version of this specification?

The latest version of our specifications will always be on [our website](#) and may differ from printed versions. We will inform centres about changes to specifications.

This qualification is in draft form and has not yet been accredited by the regulator, Ofqual. It is published to enable teachers to have an early sight of our proposed approach to this qualification. Further changes may be required, and no assurance can be given at this time that the proposed qualification will be made available in its current form, or that it will be accredited in time for first teaching in 2026.

Contents

1	Qualifications at a glance	5
1.1	Qualification structures	5
1.2	Comparison between the Cambridge Advanced Nationals Qualifications and the Level 3 Cambridge Technicals qualification model	7
2	Why choose OCR?	10
2.1	Our specifications	10
2.2	Our support.....	10
2.2.1	More help and support.....	11
2.3	People and Planet	11
2.4	Aims and learning outcomes.....	12
2.5	What are the key features of this specification?	12
2.6	Acknowledgements.....	13
3	Qualification overview	14
3.1	OCR Level 3 Alternative Academic Qualification Cambridge Advanced National in Mental Health: Individuals & Society (Certificate) overview.....	14
3.2	OCR Level 3 Alternative Academic Qualification Cambridge Advanced National in Mental Health: Individuals & Society (Extended Certificate) overview.....	16
3.3	Purpose statement – Certificate.....	18
3.4	Purpose statement – Extended Certificate.....	21
4	About these qualifications	25
4.1	Qualification size.....	25
4.2	Availability and language	25
4.3	Prior knowledge and experience.....	25
5	Units.....	26
5.1	Guidance on unit content	26
5.1.1	Externally assessed units (F400 and F401).....	26
5.1.2	NEA units (F402-F405).....	27
5.1.3	Command words	27
5.1.4	Performance objectives (POs):.....	27
5.2	Externally assessed units	28
5.2.1	Unit F400: Fundamentals of mental health and the individual.....	28
5.2.2	Unit F401: Mental health, wellbeing and society.....	37
5.3	NEA Units.....	45
5.3.1	Unit F402: Supporting and promoting mental health and wellbeing in organisations.....	45
5.3.2	Unit F403: Community-based support for mental health and wellbeing.....	58
5.3.3	Unit F404: Supporting mental health and wellbeing with physical activity	69
5.3.4	Unit F405: Supporting mental health and wellbeing with outdoor and creative activities	79

6	Assessment and grading.....	90
6.1	Overview of the assessment.....	90
6.2	Synoptic assessment.....	92
6.3	Transferable skills.....	93
6.4	Grading and awarding grades.....	93
6.5	Performance descriptors.....	95
7	Non examined assessment (NEA) units.....	97
7.1	Preparing for NEA unit delivery and assessment.....	97
7.1.1	Centre and teacher/assessor responsibilities.....	97
7.2	Requirements and guidance for delivering and marking the OCR-set assignments.....	98
7.2.1	Ways to authenticate work.....	101
7.2.2	Group work.....	102
7.2.3	Plagiarism.....	102
7.3	Feedback.....	104
7.3.1	Reporting suspected malpractice.....	106
7.3.2	Student and centre declarations.....	106
7.3.3	Generating evidence.....	106
7.3.4	Presentation of the final piece of work.....	107
7.4	Assessing NEA units.....	108
7.4.1	Applying the assessment criteria.....	108
7.4.2	Annotating students' work.....	109
7.4.3	Internal standardisation.....	109
7.4.4	Reattempting work to improve the grade before submitting marks to us.....	109
7.4.5	Submitting outcomes.....	110
7.4.6	Resubmitting moderated work to us to improve the grade.....	110
7.5	Moderating NEA units.....	111
7.5.1	Sample requests.....	111
8	Administration.....	112
8.1	Assessment availability.....	112
8.2	Collecting evidence of student performance to ensure resilience in the qualifications system.....	112
8.3	Equality Act information relating to Cambridge Advanced Nationals.....	112
8.4	Accessibility.....	112
8.5	Requirements for making an entry.....	114
8.5.1	Making estimated unit entries.....	114
8.5.2	Making final unit entries.....	114
8.6	Certification rules.....	114
8.7	Unit and qualification resits.....	115
8.8	Post-results services.....	115

Appendix A: Guidance for the production of electronic evidence.....	116
Structure for evidence	116
Data formats for evidence	116
Appendix B: Command Words.....	118
External assessment.....	118
Non examined assessment (NEA).....	119

DRAFT

1 Qualifications at a glance

1.1 Qualification structures

Key to units for these qualifications:

EA = External Assessment	We set and mark the exams for these units.
NEA = Non Examined Assessment	We set the assignment for these units. You assess the assignment and we moderate the assessment.
M = Mandatory	Students must complete these units.
O = Optional	Students must complete some of these units.
GLH = Guided Learning Hours	The teacher contact time needed to teach the content, plus the assessment time for the unit.

OCR Level 3 Alternative Academic Qualification Cambridge Advanced National in Mental Health: Individuals & Society (Certificate)

For this qualification, students must complete 2 units:

- One mandatory externally assessed unit
- One mandatory NEA unit

OCR Level 3 Alternative Academic Qualification Cambridge Advanced National in Mental Health: Individuals & Society (Extended Certificate)

For this qualification, students must complete 5 units:

- Two mandatory externally assessed units
- Two mandatory NEA units
- One optional NEA unit

Unit no	Unit title	Unit ref no (URN)	Guided learning hours (GLH)	Assessment method	Certificate	Extended Certificate
F400	Fundamentals of mental health and the individual	TBC	90	E	M	M
F401	Mental health, wellbeing and society	TBC	60	E	-	M
F402	Supporting and promoting mental health and wellbeing in organisations	TBC	90	N	M	M
F403	Community-based support for mental health and wellbeing	TBC	60	N	-	M
F404	Supporting mental health and wellbeing with physical activity	TBC	60	N	-	O
F405	Supporting mental health and wellbeing with outdoor and creative activities	TBC	60	N	-	O

DRAFT

1.2 Comparison between the Cambridge Advanced Nationals Qualifications and the Level 3 Cambridge Technicals qualification model

	Area of comparison	Approach used in these Level 3 Cambridge Advanced Nationals qualifications	Approach used in the Level 3 Cambridge Technicals qualification model	Reasons for the change
1	The size of the qualifications	<p>Qualifications are available in two sizes</p> <ul style="list-style-type: none"> • 150/180 GLH • 360 GLH <p>The 180 GLH qualification includes nested units from the 360 GLH qualification.</p>	There is no Level 3 Cambridge Technical qualification for this subject.	<p>For this subject, the Department for Education allows:</p> <ul style="list-style-type: none"> • a maximum size of 360 GLH for these qualifications. • a maximum of two qualification sizes.
2	Number and duration of external assessments	<p>180 GLH qualification:</p> <ul style="list-style-type: none"> • One externally assessed unit • Exams are 1 hour 15 minutes (depending on the unit) <p>360 GLH qualification:</p> <ul style="list-style-type: none"> • Two externally assessed units • Exams are 1 hour 15 or 1 hour 45 minutes (depending on the subject). 	There is no Level 3 Cambridge Technical qualification for this subject.	<p>It is an Ofqual requirement to have 40% external assessment in these qualifications.</p> <p>The exam design is intended to aid accessibility and encourage student engagement while easing the exam burden for students and timetabling.</p>
3	Format of the exam	Each exam is available in January and June and is paper-based.	There is no Level 3 Cambridge Technical qualification for this subject.	It is an Ofqual requirement to have two assessment opportunities per assessment.
4	Setting the NEA assignment	We will set all NEA assignments.	There is no Level 3 Cambridge Technical qualification for this subject.	This is a requirement of our Regulator, Ofqual.
5	Lifespan of the assignment	Each assignment will remain live for two years, with a new assignment being released every year.	There is no Level 3 Cambridge Technical qualification for this subject.	This is a requirement of our Regulator, Ofqual.

6	The approach to achieving unit grades on the NEA units and its impact on qualification outcomes	<p>These take a ‘compensatory’ approach. This means that:</p> <ul style="list-style-type: none"> the unit grade students achieve is based on the total number of criteria achieved for that unit. the total number can come from any combination of the Pass, Merit or Distinction criteria. students do not have to achieve all criteria for a grade to achieve that grade (e.g. all Pass criteria to achieve a unit Pass). if students do not achieve enough total criteria for a unit Pass, the criteria they do achieve will still earn uniform marks (UMS) which will count towards their qualification outcome. The qualification outcome is based on the combined total UMS achieved for all units. This means that students may still pass the qualification if they achieve enough total marks, even if they do not pass all units. Every mark counts! 	<p>These take a ‘hurdles’ approach. This means students must achieve:</p> <ul style="list-style-type: none"> all Pass criteria to achieve a unit Pass all Pass and Merit criteria to achieve a unit Merit. all Pass, Merit and Distinction criteria to achieve a unit Distinction. At least a Pass for each NEA unit to achieve the qualification (along with at least a near pass in the examined unit/s). 	The Cambridge Advanced Nationals qualifications are designed for academic progression. A compensatory approach rewards students for what they can do by combining marks achieved to calculate a qualification outcome.
7	Number of NEA Assessment Criteria	Each NEA unit of the same size has a fixed and consistent number of Pass, Merit and Distinction assessment criteria, within and across qualifications.	The number of Pass, Merit and Distinction assessment criteria differs across units and qualifications.	<p>This is to:</p> <ul style="list-style-type: none"> ensure a consistent approach to the awarding of units within each qualification and across qualifications in the suite. aid familiarity of approach for teachers and students.
8	NEA Assessment Criteria design	<p>There will be 22 or 28 assessment criteria for each NEA unit. Each assessment criterion is designed to:</p> <ul style="list-style-type: none"> assess one discrete task or activity 	There may be fewer assessment criteria for each unit, but these are typically broader, and may assess	<p>This is to:</p> <ul style="list-style-type: none"> ensure clarity of requirements for students in the form of

		<ul style="list-style-type: none"> provide a yes/no approach to decision-making and achievement. 	several tasks or activities in one criterion.	<p>discrete tasks or activities that they should evidence</p> <ul style="list-style-type: none"> simplify decision-making for teachers assessing students' work.
9	Introduced Performance Objectives for each unit	Each exam question and each Assessment Criterion in the NEA units is mapped to one of our four performance objectives.	These qualifications do not contain performance objectives.	To aid consistency of approach and demand to exams and assignments over time.
10	Moderation opportunities for the NEA assignments	Moderation is available twice each year in windows.	Moderation is available on-demand.	Typically, Level 3 Cambridge Advanced Nationals will be delivered in two years. This allows you the opportunity for two free moderation activities in each academic year.
11	Moderation approach	Moderation takes the form of face-to-face or virtual visits between the centre and our moderator.	Moderation takes the form of face-to-face or virtual visits between the centre and our moderator.	<p>We have kept this the same to reflect the most requested approach to moderation from centres since the pandemic</p> <p>This is to ease the moderation burden on centres, while still providing direct interaction with our moderator.</p>
12	SAMs for NEA	Sample assignments are available for you to use as practice materials with students.	We do not provide sample assignments for practice purposes.	This is to ensure that students have access to sample assessment material for both the EA and NEA units.

2 Why choose OCR?

Choose OCR and you've got the reassurance that you're working with one of the UK's leading exam boards. We've developed our specifications in consultation with teachers, employers, subject experts and higher education institutions (HEIs) to give students a qualification that's relevant to them and meets their needs.

We're part of Cambridge University Press & Assessment. We help millions of people worldwide unlock their potential. Our qualifications, assessments, academic publications and original research spread knowledge, spark curiosity and aid understanding around the world.

We work with a range of education providers in both the public and private sectors. These include schools, colleges, HEIs and other workplaces. Over 13,000 centres choose our A Levels, GCSEs and vocational qualifications including Cambridge Nationals and legacy Cambridge Technicals.

2.1 Our specifications

We provide specifications that help you bring the subject to life and inspire your students to achieve more.

We've created teacher-friendly specifications based on extensive research and engagement with the teaching community. Our specifications are designed to be straightforward to deliver and accessible for students. The design allows you to tailor the delivery of the course to suit your needs.

2.2 Our support

We provide a range of support services to help you at every stage, from preparation to delivery:

- A wide range of high-quality creative resources including resources created by leading organisations in the industry.
- Textbooks and teaching and learning resources from leading publishers. The Cambridge Advanced Nationals page on our website has more information about all the published support for the qualifications that we have endorsed.
- Professional development for teachers to meet a range of needs. To join our training (either face-to-face or online) or to search for training materials, go to the [Professional Development page](#) on our website.
- [Active Results](#) which is our free results analysis service. It helps you review the performance of individual students or whole groups.
- [ExamBuilder](#) which is our free question-building platform. It helps you to build your own tests using past OCR exam questions.
- Our Subject Advisors, who give information and support to centres. They can help with specification and non examined assessment (NEA) advice, updates on resources developments and a range of training opportunities. They use networks to work with subject communities and share ideas and expertise to support teachers.

2.2.1 More help and support

Whether you are new to OCR or already teaching with us, you can find useful information, help and support on our [website](#). Or get in touch:

support@ocr.org.uk

[@ocrexams](#)

01223 553998

2.3 People and Planet

We are part of Cambridge University Press & Assessment, which has clear commitments to champion sustainability, diversity, trust and respect for our people and planet.

We are committed to supporting a curriculum that helps young people develop an ethical view of the world. This enables them to take social responsibility, understand environmental issues and prepare them for the green jobs of the future.

Our equality, diversity, inclusion and belonging principles are that we:

- are respectful and considerate
- celebrate differences and promote positive attitudes to belonging
- include perspectives that reflect the diverse cultural and lifestyle backgrounds of our society
- challenge prejudicial views and unconscious biases
- promote a safe and supportive approach to learning
- are accessible and fair, creating positive experiences for all
- provide opportunities for everyone to perform at their best
- are contemporary, relevant and equip everyone to live and thrive in a global, diverse world
- create a shared sense of identity in a modern mixed society with one humanity.

To learn more, including our work on accessibility in our assessment materials, visit our [People and Planet page](#).

2.4 Aims and learning outcomes

Our Cambridge Advanced Nationals in Mental Health: Individuals & Society will encourage students to:

- develop key knowledge, understanding and skills, relevant to the subject
- think creatively, innovatively, analytically, logically and critically
- develop valuable communication skills that are important in all aspects of further study and life
- develop transferable learning and skills, such as communication, planning, presentation and research skills, that are important for progression to HE and can be applied to real-life contexts and work situations
- develop independence and confidence in applying the knowledge and skills that are vital for progression to HE and relevant to the health and social care sector and more widely.

2.5 What are the key features of this specification?

The key features of our Cambridge Advanced Nationals in Mental Health: Individuals & Society for you and your students are:

- a simple and intuitive assessment model, that has:
 - externally assessed units, which focus on subject knowledge and understanding
 - applied non examined assessment units (NEA)
 - optional NEA units to provide flexibility
- a specification developed with teachers specifically for teachers. The specification lays out the subject content, assessment criteria, teacher guidance and delivery requirements clearly
- a flexible support package made based on teachers' needs. The support package will help teachers to easily understand the qualification and how it is assessed
- a team of Subject Advisors who directly support teachers
- a specification designed to:
 - complement A Levels and/or other Level 3 qualifications in a Post-16 study programme
 - develop wider transferable skills, knowledge and understanding desired by HEIs. More detail about the transferable skills these qualifications may develop is in [Section 5.3](#).

All Cambridge Advanced National qualifications offered by OCR are regulated by Ofqual, the Regulator for qualifications offered in England.

The qualification numbers for OCR's Alternative Academic Qualification Cambridge Advanced Nationals in Mental Health: Individuals & Society are:

- Certificate: TBC
- Extended Certificate: TBC

2.6 Acknowledgements

We would like to acknowledge the following Higher Education Providers for their input and support in designing these qualifications:
Anglia Ruskin University
Nottingham Trent University
Royal Holloway University of London
University of Bradford
University of Wolverhampton
University of York

DRAFT

3 Qualification overview

3.1 OCR Level 3 Alternative Academic Qualification Cambridge Advanced National in Mental Health: Individuals & Society (Certificate) overview

Qualification number	TBC
First entry date	01 September 2026
Guided learning hours (GLH)	180
Total qualification time (TQT)	230
OCR entry code	H098
Approved age range	16-18, 18+, 19+
Offered in	England only
Performance table information	This qualification is designed to meet the Department for Education's requirements for qualifications in the Alternative Academic Qualifications category of the 16-19 performance tables.
Eligibility for funding	This qualification meets funding approval criteria.
UCAS Points	This qualification is recognised in the UCAS tariff tables. You'll find more information on the UCAS website .
This qualification is suitable for students who:	<ul style="list-style-type: none"> • are age 16-19 and on a full-time study programme • want to develop applied knowledge and skills in mental health and wellbeing • want to progress onto other related study, such as higher education courses in mental health and wellbeing, public health and community studies and environmental health.
Entry requirements	There is no requirement for students to achieve any specific qualifications before taking this qualification
Qualification requirements	Students must complete two units: <ul style="list-style-type: none"> • one externally assessed unit • one NEA unit
Assessment method/model	<p>Unit F400 is assessed by an exam and marked by us.</p> <p>You will assess the NEA unit and we will moderate it.</p> <p>The NEA assignments are live for two years. The front cover details the intended cohort. You must make sure you use the live assignment that relates to the student's cohort for assessment and submit in the period in which the assignments are live.</p> <p>For example, a cohort beginning a two-year course in September 2026 should use the set of assignments marked as being for 2026-2028 so that whatever order assignments are taken in, they will be</p>

	<p>able to re-submit improved work on the same NEA assignment if they wish to during their study of the qualification.</p> <p>Centres should avoid allowing new cohorts to use assignments which have already been live for a year, e.g. students who start the course in September 2027 using assignments for the 2026-2028 cohorts.</p> <p>Centres must have suitable controls in place to ensure that NEA assignment work is completed by each student independently and must not allow previously completed work for assignments which are still live to be shared as examples with other students.</p>
Exam series each year	<ul style="list-style-type: none"> • January • June
Exam resits	Students can resit the examined unit twice before they complete the qualification.
NEA submission	<p>There are two windows each year to submit NEA outcomes and request a moderation visit.</p> <p>You must make unit entries for students before you can submit outcomes for a visit.</p> <p>All dates are on our administration pages.</p>
Resubmission of students' NEA work	<p>If students have not performed at their best in the NEA assignments, they can improve their work and submit it to you again for assessment. They must have your agreement and you must be sure it is in the student's best interests.</p> <p>We use the term 'resubmission' when referring to student work that has previously been submitted for moderation. Following moderation, a student can attempt to improve their work for you to assess and provide the final mark to us. There is one resubmission opportunity per NEA assignment.</p> <p>All work submitted (or resubmitted) must be based on the assignment that is live for assessment.</p> <p>For information about feedback see Section 7.3. The final piece of work must be completed solely by the student and teachers must not detail specifically what amendments should be made.</p>
Grading	Information about unit and qualification grading is in Section 6 .

3.2 OCR Level 3 Alternative Academic Qualification Cambridge Advanced National in Mental Health: Individuals & Society (Extended Certificate) overview

Qualification number	TBC
First entry date	01 September 2026
Guided learning hours (GLH)	360
Total qualification time (TQT)	460
OCR entry code	H198
Approved age range	16-18, 18+, 19+
Offered in	England only
Performance table information	This qualification is designed to meet the Department for Education's requirements for qualifications in the Alternative Academic Qualifications category of the 16-19 performance tables.
Eligibility for funding	This qualification meets funding approval criteria.
UCAS Points	This qualification is recognised in the UCAS tariff tables. You'll find more information on the UCAS website .
This qualification is suitable for students who:	<ul style="list-style-type: none"> • are age 16-19 and on a full-time study programme • want to develop applied knowledge and skills in mental health and wellbeing • want to progress onto other related study, such as higher education courses in mental health and wellbeing, public health and community studies, counselling, creative therapeutic practice, and environmental health.
Entry requirements	There is no requirement for students to achieve any specific qualifications before taking this qualification
Qualification requirements	Students must complete five units: <ul style="list-style-type: none"> • two externally assessed units • three NEA units
Assessment method/model	<p>Units F400 and F401 are assessed by an exam and marked by us. You will assess the NEA units and we will moderate them.</p> <p>The NEA assignments are live for two years. The front cover details the intended cohort. You must make sure you use the live assignment that relates to the student's cohort for assessment and submit in the period in which the assignments are live.</p> <p>For example, a cohort beginning a two-year course in September 2026 should use the set of assignments marked as being for 2026-2028 so that whatever order assignments are taken in, they will be</p>

	<p>able to re-submit improved work on the same NEA assignment if they wish to during their study of the qualification.</p> <p>Centres should avoid allowing new cohorts to use assignments which have already been live for a year, e.g. students who start the course in September 2027 using assignments for the 2026-2028 cohorts.</p> <p>Centres must have suitable controls in place to ensure that NEA assignment work is completed by each student independently and must not allow previously completed work for assignments which are still live to be shared as examples with other students.</p>
Exam series each year	<ul style="list-style-type: none"> • January • June
Exam resits	Students can resit each examined unit twice before they complete the qualification.
NEA Submission	<p>There are two windows each year to submit NEA outcomes and request a moderation visit by an OCR Assessor.</p> <p>You must make unit entries for students before you can submit outcomes for a visit.</p> <p>All dates are on our administration pages.</p>
Resubmission of students' NEA work	<p>If students have not performed at their best in the NEA assignments, they can improve their work and submit it to you again for assessment. They must have your agreement and you must be sure it is in the student's best interests.</p> <p>We use the term 'resubmission' when referring to student work that has previously been submitted to OCR for moderation. Following OCR moderation, a student can attempt to improve their work for you to assess and provide the final mark to us. There is one resubmission opportunity per NEA assignment.</p> <p>All work submitted (or resubmitted) must be based on the assignment that is live for assessment.</p> <p>For information about feedback see Section 7.3. The final piece of work must be completed solely by the student and teachers must not detail specifically what amendments should be made.</p>
Grading	Information about unit and qualification grading is in Section 6 .

3.3 Purpose statement – Certificate



OCR Level 3 Alternative Academic Qualification Cambridge Advanced National in Mental Health: Individuals & Society (Certificate)

Qualification number: TBC

Overview

Who this qualification is for

The OCR Level 3 Alternative Academic Qualification Cambridge Advanced National in Mental Health: Individuals & Society (Certificate) is for students aged 16-19 years old. It will develop knowledge, understanding and skills that will help prepare you for progression to undergraduate study when taken alongside other qualifications and are relevant to mental health and wellbeing, within the broader health and social care sector.

You might be interested in this qualification if you want a small qualification that builds applied or practical skills, to take alongside and enhance your A Levels or other Level 3 qualifications. You will have the opportunity to learn key knowledge and understanding in the subject and apply what you learn to real-life contexts, such as:

- Understanding the range of factors that can influence our mental health and the potential effects they can have.
- Identifying strategies that can be implemented to make a positive difference in the lives of individuals and communities.
- Using monitoring tools to understand individuals' mental health and wellbeing, and considering the factors that influence us and the strategies that can be used to effectively improve the lives of individuals.

The qualification will also help you develop independence and confidence in using skills that are relevant to the sector and that prepare you for progressing to university courses where independent study skills are needed. You will develop the following transferable skills that can be used in both higher education and other life and work situations:

- Communicating and collaborating effectively with individuals and groups. Communication is a critical skill in many areas of mental health and wellbeing, from working with individuals to encourage improvements to mental health and wellbeing, to communicating widespread public health campaigns.
- Critical thinking and problem solving: students will explore options, tools and techniques to tackle problems and use critical thinking skills to choose appropriate ways to proceed.
- Researching topic areas independently and recording research sources, then using them to interpret findings and present evidence.
- Decision making and making recommendations: to identify effective strategies and support services and recommend them to individuals.
- Time management: it is important both in higher education and in practice that work is completed on time. Students will learn techniques to effectively manage their time.

This qualification will complement other learning that you're completing at Key Stage 5. If you are a full-time student, it will be part of your studies along with your A Levels and/or other Level 3 qualifications.

What you will study when you take this qualification

Through a combination of theoretical study and hands-on experience, you will develop the necessary knowledge and skills that can support progression to higher education mental health and wellbeing study.

In the examined unit, you will study key knowledge and understanding relevant to individual mental health and wellbeing. In the non examined assessment (NEA) unit, you will demonstrate knowledge and skills you learn by completing an applied assignment. More information about the knowledge and skills you will develop is below.

All units in the qualification are mandatory. You must take **all** of these units:

- F400: Fundamentals of mental health and the individual

This unit is assessed by an exam.

In this unit you will learn about the key topics that are important for the mental health and wellbeing of an individual. Topics include:

- Topic Area 1 Introducing mental health and wellbeing
- Topic Area 2 The brain and body
- Topic Area 3 Factors Influencing mental health and wellbeing
- Topic Area 4 Models of mental health
- Topic Area 5 Mental health issues and disorders
- Topic Area 6 Strategies for managing mental health and wellbeing

- F402: Supporting and promoting mental health in organisations

This unit is assessed by an assignment.

In this unit you will learn about how organisations support the mental health of their employees. You will learn how to identify the ways work can impact mental health, best practices for monitoring, influencing and improving mental health through communicating a mental health campaign. Topics include:

- Topic Area 1 Mental health, wellbeing and the workforce
- Topic Area 2 Influencing the mental health and wellbeing of a workforce
- Topic Area 3 Planning an effective mental health and wellbeing campaign

The subjects that complement this qualification

This qualification complements A Levels and Level 3 qualifications in:

- Psychology
- Sociology
- Business
- Health and social care
- Human biology

The types of courses you may progress to

Both the subject-specific knowledge, understanding and skills, and broader transferable skills developed in this qualification will help you progress to further study in related areas such as:

- BSc (Hons) Mental Health and Wellbeing
- BA (Hons) Counselling, Mental Health and Wellbeing
- BSc (Hons) Mental Health and Wellbeing Coaching
- BSc (Hons) Health and Wellbeing
- BSc (Hons) Health Studies

Why you should take the OCR Level 3 Alternative Academic Qualification Cambridge Advanced National in Mental Health: Individuals & Society (Certificate)

There are two qualifications available in Mental Health and Wellbeing. These are:

H098 – this is 180 GLH in size

H198 – this is 360 GLH in size

You should take this Certificate qualification if you want a small Level 3 qualification that builds some applied knowledge and skills in mental health and wellbeing. This qualification is an Alternative Academic Qualification that is the same size as an AS Level qualification. It is half the size of an A Level. It could be taken alongside A Levels and/or other Level 3 qualifications to enhance your learning, helping you to build broader knowledge and skills that are valued in undergraduate study, and relevant for progression to higher education. You would take this qualification alongside A Levels and/or other Level 3 qualifications as part of your study programme at Key Stage 5.

More information

More information about this qualification is in these documents:

- Sample Assessment Material (SAM) Question Papers:
 - Unit F400: <<insert link>>
- Guides to our SAM Question Papers:
 - Unit F400: <<insert link>>
- SAM Set Assignment(s):
 - Unit F402: <<insert link>>
- Student Guide to NEA Assignments: <<insert link>>

3.4 Purpose statement – Extended Certificate



Oxford Cambridge and RSA

OCR Level 3 Alternative Academic Qualification Cambridge Advanced National in Mental Health: Individuals & Society (Extended Certificate)

Qualification number: TBC

Overview

Who this qualification is for

The OCR Level 3 Alternative Academic Qualification Cambridge Advanced National in Mental Health: Individuals & Society (Extended Certificate) is for students aged 16-19 years old. It will develop knowledge, understanding and skills that will help prepare you for progression to undergraduate study and are relevant to mental health and wellbeing, within the broader health and social care sector.

You might be interested in this qualification if you want to learn key knowledge and understanding in the subject and apply what you learn to practical, real-life contexts, such as:

- Understanding the range of factors that can influence our mental health and the potential effects they can have.
- Identifying strategies that can be implemented to make a positive difference in the lives of individuals and communities.
- Exploring existing provision and services involved with improving, maintaining and promoting healthier populations and environments.
- Using monitoring tools to understand individuals' mental health and wellbeing, and considering the factors that influence us and the strategies that can be used to effectively improve the lives of individuals.
- Understanding societal attitudes to mental health and how they have changed over time.
- Understanding the impacts of social media and global issues on mental health and wellbeing.

The qualification will also help you develop independence and confidence in using skills that are relevant to the sector and that prepare you for progressing to university courses where independent study skills are needed. You will develop the following transferable skills that can be used in both higher education and other life and work situations:

- Communicating and collaborating effectively with individuals and groups. Communication is a critical skill in many areas of mental health and wellbeing, from working with individuals to encourage improvements to mental health and wellbeing, to communicating widespread public health campaigns.
- Critical thinking and problem solving: students will explore options, tools and techniques to tackle problems and use critical thinking skills to choose appropriate ways to proceed.
- Researching topic areas independently and recording research sources, then using them to interpret findings and present evidence.
- Decision making and making recommendations: to identify effective strategies and support services and recommend them to individuals.
- Time management: it is important both in higher education and in practice that work is completed on time. Students will learn techniques to effectively manage their time.

This qualification will complement other learning that you're completing at Key Stage 5. If you are a full-time student, it will be part of your studies along with A Levels and/or other Level 3 qualifications.

What you will study when you take this qualification

Through a combination of theoretical study and hands-on experience, you will develop the necessary knowledge and skills that can support progression to higher education mental health and wellbeing study.

In the examined units, you will study key knowledge and understanding relevant to individual mental health and wellbeing, and mental health and wellbeing in society. In the non examined assessment (NEA) units, you will demonstrate knowledge and skills you learn by completing applied or practical assignments. More information about the knowledge and skills you will develop is below.

The qualification has four mandatory units and two optional units.

- These are the **mandatory** units – you must take **all** these units:

- F400: Fundamentals of mental health and the individual

This unit is assessed by an exam.

In this unit you will learn about the key topics that are important for the mental health and wellbeing of an individual. Topics include:

- Topic Area 1 Introducing mental health and wellbeing
- Topic Area 2 The brain and body
- Topic Area 3 Factors influencing mental health and wellbeing
- Topic Area 4 Models of mental health
- Topic Area 5 Mental health issues and disorders
- Topic Area 6 Strategies for managing mental health and wellbeing

- F401: Mental health, wellbeing and society

This unit is assessed by an exam.

In this unit you will learn about what society is and the things that combine to shape society. You will learn about how perceptions of mental health in society have changed over time and how this has affected the treatment of and care for people with mental health disorders. You will also learn about what the provision of support for mental health and wellbeing in society is like today and the current societal influences on mental health and wellbeing. Topics include:

- Topic Area 1 Evolving perceptions of mental health in society
- Topic Area 2 Societal developments and mental health
- Topic Area 3 Society today
- Topic Area 4 Current influences on the mental health and wellbeing of society

- F402: Supporting and promoting mental health and wellbeing in organisations

This unit is assessed by an assignment.

In this unit you will learn about how organisations support the mental health of their employees. You will learn how to identify the ways work can impact mental health, best practices for monitoring, influencing and improving mental health through communicating a mental health campaign. Topics include:

- Topic Area 1 Mental health, wellbeing and the workforce
- Topic Area 2 Influencing the mental health and wellbeing of a workforce
- Topic Area 3 Planning an effective mental health and wellbeing campaign

- F403: Community-based support for mental health and wellbeing

This unit is assessed by an assignment.

In this unit you will learn about social connectedness, why it's important and how it can be improved. You will learn about the benefits, processes, and factors affecting social prescribing and how it can be used to support improvements in mental health and wellbeing. Topics include:

- Topic Area 1 Social connectedness
- Topic Area 2 Social prescribing and community-based support
- Topic Area 3 Supporting individual needs through social prescribing and community-based support

These are the **optional** units – you must take **one** of these units:

- F404: Supporting mental health and wellbeing with physical activity

This unit is assessed by an assignment.

In this unit you will learn about physical activity and its impact on mental health and wellbeing. You will also learn how to plan physical activities to support improvements in mental health and wellbeing and how physical activity participants can be supported to ensure effective participation and engagement. Topics include:

- Topic Area 1 Impact of physical activity on mental health and wellbeing
- Topic Area 2 Planning physical activities for mental health and wellbeing
- Topic Area 3 Supporting physical activity participation and engagement

- F405: Supporting mental health and wellbeing with outdoor and creative activities

This unit is assessed by an assignment.

In this unit you will learn about how the role of nature connectedness and the outdoors can support improvements in mental health and wellbeing. You will also learn about the different types of outdoor activities that can be used for therapeutic purposes and the theories that underpin their use, as well as creative therapies in practice. Topics include:

- Topic Area 1 Nature, the outdoors and mental health and wellbeing
- Topic Area 2 Outdoor activities for therapeutic purposes
- Topic Area 3 Creative therapies in practice

The subjects that complement this qualification

This qualification complements A Levels and Level 3 qualifications in:

- Psychology
- Sociology
- Business
- Health and social care
- Human biology

The types of courses you may progress to

Both the subject-specific knowledge, understanding and skills, and broader transferable skills developed through these units, will help you progress to further study in related areas such as:

- BSc (Hons) Mental Health and Wellbeing
- BA (Hons) Counselling, Mental Health and Wellbeing
- BSc (Hons) Mental Health and Wellbeing Coaching
- BSc (Hons) Health and Wellbeing
- BSc (Hons) Health Studies

Why you should take the OCR Level 3 Alternative Academic Qualification Cambridge Advanced National in Mental Health: Individuals & Society (Extended Certificate)

There are two qualifications available in Mental Health and Wellbeing. These are:

H098 – this is 180 GLH in size

H198 – this is 360 GLH in size

You should take this Extended Certificate qualification if you want a Level 3 qualification that builds applied knowledge and skills in mental health and wellbeing. This qualification is an Alternative Academic Qualification that is the same size as an A Level. When it is taken alongside other Level 3 qualifications it will complement them, helping you to build broader knowledge and skills that are valued in undergraduate study, and relevant for progression to higher education. You would take this qualification alongside other Level 3 qualifications as part of your study programme at Key Stage 5.

More information

More information about this qualification is in these documents:

- Sample Assessment Material (SAM) Question Papers:
 - Unit F400<<insert link>>
 - Unit F401: <<insert link>>
- Guides to our SAM Question Papers:
 - Unit F400: <<insert link>>
 - Unit F401: <<insert link>>
- SAM Set Assignment(s):
 - Unit F402: <<insert link>>
 - Unit F403: <<insert link>>
 - Unit F404<<insert link>>
 - Unit F405: <<insert link>>
- Student Guide to NEA Assignments: <<insert link>>

4 About these qualifications

4.1 Qualification size

The size of each qualification is described in terms of Guided Learning Hours (GLH) and Total Qualification Time (TQT).

GLH indicates the approximate time (in hours) you will spend supervising or directing study and assessment activities. We have worked with people who are experienced in delivering related qualifications to determine the content that needs to be taught and how long it will take to deliver.

TQT includes two parts:

- GLH
- an estimate of the number of hours a student will spend on unsupervised learning or assessment activities (including homework) to successfully complete their qualification.

The OCR Level 3 Alternative Academic Qualification Cambridge Advanced National in Mental Health: Individuals & Society (Certificate) is 180 GLH and 230 TQT.

The OCR Level 3 Alternative Academic Qualification Cambridge Advanced National in Mental Health: Individuals & Society (Extended Certificate) is 360 GLH and 460 TQT.

4.2 Availability and language

The Level 3 Alternative Academic Qualification Cambridge Advanced Nationals are available in England only. They are **not** available in Wales or Northern Ireland.

The qualifications and their assessment materials are available in English only. We will only assess answers written in English.

4.3 Prior knowledge and experience

Recognition of prior learning (RPL) is the process for recognising learning that never received formal recognition through a qualification or certification. It includes knowledge and skills gained in school, college or outside of formal learning situations. These may include:

- domestic/family life
- education
- training
- work activities
- voluntary activities.

In most cases RPL will not be appropriate for directly evidencing the requirements of the NEA assignments for the Cambridge Advanced National qualifications. However, if you feel that your student could use RPL to support their evidence, you must follow the guidance provided in our [RPL Policy](#).

5 Units

5.1 Guidance on unit content

This section describes what must be taught so that students can access all available marks and meet assessment criteria.

5.1.1 Externally assessed units (F400 and F401)

The externally assessed units contain a number of topic areas.

For each topic area, we list the **teaching content** that must be taught and give information on the **breadth and depth** of teaching needed.

Teaching content

Questions can be asked about anything in the teaching content or breadth and depth columns

Breadth and depth

The breadth and depth column:

- clarifies the breadth and depth of teaching needed
- indicates the range of knowledge and understanding that can be assessed in the exam
- confirms any aspects that you do not need to teach as 'does not include' statements.

Teaching must cover **both** the **teaching content** and **breadth and depth** columns.

Knowledge and understanding

This is what we mean by knowledge and understanding:

Knowledge	<ul style="list-style-type: none"> • Be able to identify or recognise an item, for example on a diagram. • Use direct recall to answer a question, for example the definition of a term.
Understanding	<ul style="list-style-type: none"> • To assess and evidence the perceived meaning of something in greater depth than straight identification or recall. • Understanding will be expressed and presented using terms such as: how; why; when; reasons for; advantages and disadvantages of; benefits and limitations of; purpose of; suitability of; recommendations for improvement; appropriateness of something to/in different contexts.

Students will need to **understand** the content, unless the breadth and depth column identifies it as knowledge only.

Any item(s) that should be taught as **knowledge** only will start with the word 'know' in the breadth and depth column.

All other content must be taught as understanding.

5.1.2 NEA units (F402-F405)

The NEA units contain a number of topic areas.

For each topic area, we list **teaching content** that must be taught and give **exemplification**. The exemplification shows the teaching expected to equip students to successfully complete their assignments.

5.1.3 Command words

[Appendix B](#) gives information about the command words that will be used in the external assessments and the NEA assessment criteria.

5.1.4 Performance objectives (POs):

Each Cambridge Advanced National qualification has four Performance Objectives.

PO1	Show knowledge and understanding
PO2	Apply knowledge and understanding
PO3	Analyse and evaluate knowledge, understanding and performance
PO4	Demonstrate and apply skills and processes relevant to the subject

PO1 is assessed in the externally assessed unit only.

PO4 is assessed in the NEA units only.

The weightings of the Performance Objectives across the units in the **Certificate** qualification are:

Performance Objective	Externally Assessed unit (range)	NEA units	Overall weighting
PO1	16.4 - 25%	N/A	16.4 - 25%
PO2	14.3 - 22.9%	14.3%	28.6 - 37.2%
PO3	6.4 - 12.1%	21.4%	27.8 - 33.5%
PO4	N/A	14.3%	14.3%
Overall weighting of assessments	50%	50%	100%

The weightings of the Performance Objectives across the units in the **Extended Certificate** qualification are:

Performance Objective	Externally Assessed unit (range)	NEA units	Overall weighting
PO1	13.3 - 20%	N/A	13.3 - 20%
PO2	11.7 - 18.3%	18.3 - 20.8%	30 - 39.1%
PO3	5.3 - 10%	22.5 - 24.2%	27.8 - 34.2%
PO4	N/A	15.8 - 18.3%	15.8 - 18.3%
Overall weighting of assessments	40%	60%	100%

5.2 Externally assessed units

5.2.1 Unit F400: Fundamentals of mental health and the individual

Unit aim

Understanding mental health helps individuals maintain their own wellbeing and cope with life's challenges more effectively. It equips them with the knowledge and skills to maintain positive mental health and wellbeing. Recognising the signs of mental health issues in yourself and others is increasingly valuable. Studying mental health is essential for promoting individual and societal wellbeing, reducing stigma, fostering healthy relationships, and creating supportive communities where everyone can thrive.

In this unit, you will learn the concepts of mental health and wellbeing and gain insight into what constitutes good mental health. You will explore the factors that influence mental health and wellbeing and how they can change across various life stages. You will also learn different models of mental health, common mental disorders, and effective strategies for managing mental health and promoting wellbeing. With this knowledge, you will be empowered to prioritise mental health, seek assistance when necessary, and play a proactive role in supporting both your own mental wellbeing and that of others.

Unit F400: Fundamentals of mental health and the individual	
Topic Area 1: Introducing mental health and wellbeing	
Teaching content	Breadth and depth
1.1 Mental health, emotions and wellbeing	
1.1.1 Mental health: <ul style="list-style-type: none"> <input type="checkbox"/> What mental health is <input type="checkbox"/> Mental health issues <input type="checkbox"/> Mental health disorders 	To include: <ul style="list-style-type: none"> <input type="checkbox"/> What is meant by mental health <input type="checkbox"/> The difference between mental health issues and mental health disorders
1.1.2 Emotions: <ul style="list-style-type: none"> <input type="checkbox"/> What emotions are: <ul style="list-style-type: none"> • Elements of emotions: <ul style="list-style-type: none"> ○ Subjective experience ○ Physiological response ○ Behavioural response <input type="checkbox"/> Why we have emotions: <ul style="list-style-type: none"> • Adapting to our environment • Decision-making • Memory formation • Motivation • Social communication 	To include: <ul style="list-style-type: none"> <input type="checkbox"/> That there can be a difference between normal emotions and mental health issues
1.1.3 Wellbeing: <ul style="list-style-type: none"> <input type="checkbox"/> What wellbeing is: <ul style="list-style-type: none"> • The elements of wellbeing: <ul style="list-style-type: none"> ○ Physical ○ Mental ○ Emotional ○ Social 	To include: <ul style="list-style-type: none"> <input type="checkbox"/> That wellbeing is a holistic concept involving the interconnectedness of the elements <input type="checkbox"/> What each element of wellbeing is <input type="checkbox"/> How changes in each element can affect overall wellbeing <input type="checkbox"/> That wellbeing is a subjective concept and can be related to sense of self-worth

<p>1.1.4: Understanding mental health and wellbeing:</p> <ul style="list-style-type: none"> □ The mental health dual continuum: <ul style="list-style-type: none"> • Low to high mental health and wellbeing • Diagnosed to no diagnosis of mental health disorder □ Jahoda's six criteria 	<p>To include:</p> <ul style="list-style-type: none"> □ What the mental health dual continuum shows □ How the mental health dual continuum can be used to understand the relationship between mental health and wellbeing, and mental health disorders □ How the mental health dual continuum can be used to understand an individual's current mental health and wellbeing □ That mental health and wellbeing can change over time □ How individuals can move between quadrants of the mental health dual continuum □ The characteristics of good mental health □ How Jahoda's six criteria can be used to understand an individual's mental health □ The criticisms of Jahoda's six criteria
1.2 The importance of understanding mental health	
<ul style="list-style-type: none"> □ Stigma: <ul style="list-style-type: none"> • Types of stigma <ul style="list-style-type: none"> ○ Institutional ○ Professional ○ Public ○ Self • Reducing stigma 	<p>To include:</p> <ul style="list-style-type: none"> □ What stigma is □ What is meant by each type of stigma □ How each type of stigma can affect an individual □ How stigma can prevent willingness to discuss mental health issues □ Why understanding mental health can help to reduce stigma
1.3 Mental health and wellbeing across different life stages	
<ul style="list-style-type: none"> □ Different stages of development and mental health: <ul style="list-style-type: none"> • Childhood • Adolescence • Young adulthood • Middle adulthood • Older adulthood □ Life events: <ul style="list-style-type: none"> • Positive life events • Negative life events 	<p>To include:</p> <ul style="list-style-type: none"> □ That an individual's mental health and wellbeing can change at different life stages □ How different life events can affect an individual's position on the mental health dual continuum

Topic Area 2: The brain and body	
Teaching content	Breadth and depth
2.1 The brain	
<ul style="list-style-type: none"> □ Brain structure: <ul style="list-style-type: none"> • Amygdala • Hippocampus • Hypothalamus • Pre-frontal cortex □ Hormones: <ul style="list-style-type: none"> • Cortisol • Oxytocin • Melatonin □ Synaptic transmission: <ul style="list-style-type: none"> • Role • Components: <ul style="list-style-type: none"> ○ Pre-synaptic neuron ○ Post-synaptic neuron ○ Neurotransmitters: <ul style="list-style-type: none"> - Dopamine - Serotonin ○ Receptor ○ Synaptic gap ○ Vesicle 	<p>To include:</p> <ul style="list-style-type: none"> □ Know the main function and location of each brain structure □ The role of cortisol in regulating the stress response □ The role of oxytocin in social interactions □ The role of melatonin in regulating sleep □ How the balance of hormones can affect emotional wellbeing □ The role of dopamine in relation to reward and pleasure □ How the balance of neurochemicals can affect behaviour and mood □ The structure and function of the synapse □ The process of synaptic transmission □ The role of each neurotransmitter □ How each neurotransmitter affects the body and brain □ How neurotransmitters are reabsorbed in the synapse
2.2 The stress response	
<ul style="list-style-type: none"> □ Stress response: <ul style="list-style-type: none"> • Fight, flight or freeze • Sympathetic nervous system • Rest and digest • Parasympathetic nervous system □ Stress hormones: <ul style="list-style-type: none"> • Cortisol • Noradrenaline • Adrenaline □ Types of stress: <ul style="list-style-type: none"> • Positive • Tolerable • Toxic □ Impact on performance: <ul style="list-style-type: none"> • Yerkes-Dodson Law □ Duration: <ul style="list-style-type: none"> • Acute • Chronic 	<p>To include:</p> <ul style="list-style-type: none"> □ What stress is □ That the stress response is a normal biological response □ Know the role of the amygdala, hypothalamus and sympathetic nervous system in the response to stress □ Know the role of the parasympathetic nervous system after the initial stress response □ The main role of each stress hormone in the stress response □ How the stress response impacts on performance in different situations □ How the Yerkes-Dodson Law relates to stress, anxiety or performance □ How the Yerkes-Dodson bell curve can be used to understand the impact of stress on performance □ How the type and duration of stress experienced can affect an individual's mental health and wellbeing

Topic Area 3: Factors influencing mental health and wellbeing	
Teaching content	Breadth and depth
3.1 Biological influences on mental health and wellbeing	
<ul style="list-style-type: none"> <input type="checkbox"/> Chronic illness <input type="checkbox"/> Genetics <input type="checkbox"/> Neurodiversity 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> How chronic illness, genetics and neurodiversity can influence mental health and wellbeing <input type="checkbox"/> How chronic illness, genetics and neurodiversity can influence the likelihood of experiencing mental health issues and disorders
3.2 Social and economic influences on mental health and wellbeing	
<ul style="list-style-type: none"> <input type="checkbox"/> Social influences: <ul style="list-style-type: none"> • Family circumstances • Level of social connectedness • Societal expectations • Support networks <input type="checkbox"/> Economic influences: <ul style="list-style-type: none"> • Finances • Work 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> How the different social and economic factors can influence a person's mental health and wellbeing <input type="checkbox"/> How changes in social and economic factors can influence a person's mental health and wellbeing
3.3 Psychological influences on mental health and wellbeing	
<ul style="list-style-type: none"> <input type="checkbox"/> Psychological factors: <ul style="list-style-type: none"> • Attitudes • Coping skills • Motivation: <ul style="list-style-type: none"> ○ Intrinsic and extrinsic • Resilience <input type="checkbox"/> Negative thought patterns: <ul style="list-style-type: none"> • Catastrophising • Mental filters • Overgeneralisation <input type="checkbox"/> Personalisation 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> How the different psychological factors and negative thought patterns can influence a person's mental health and wellbeing <input type="checkbox"/> How the different psychological factors and negative thought patterns can affect everyday life
3.4 Experiential influences on mental health and wellbeing	
<ul style="list-style-type: none"> <input type="checkbox"/> Factors: <ul style="list-style-type: none"> • Childhood experiences: <ul style="list-style-type: none"> ○ Attachment theory • Lived experiences <input type="checkbox"/> Traumatic experiences 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> How positive childhood experiences can influence mental health and wellbeing <input type="checkbox"/> How negative childhood experiences can influence mental health and wellbeing <input type="checkbox"/> The features of attachment theory <input type="checkbox"/> How attachment theory can be used to explain the impact of childhood experiences on mental health and wellbeing <input type="checkbox"/> That lived and traumatic experiences can influence mental health and wellbeing
3.5 Physical influences on mental health and wellbeing	
<ul style="list-style-type: none"> <input type="checkbox"/> Factors: <ul style="list-style-type: none"> • Nutrition levels • Physical health • Sleep quality • Substance use <input type="checkbox"/> Recommended guidelines: <ul style="list-style-type: none"> • Amount of exercise <input type="checkbox"/> Amount of sleep 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> How the different physical factors can influence a person's mental health and wellbeing <input type="checkbox"/> The government recommended guideline amount of exercise per week for an average teenager and an average adult <input type="checkbox"/> The NHS recommended amount of sleep per night for an average teenager and an average adult

Topic Area 4: Models of mental health	
Teaching content	Breadth and depth
4.1 The biomedical model	
<ul style="list-style-type: none"> <input type="checkbox"/> Features <input type="checkbox"/> Benefits and limitations 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> The key features of the model <input type="checkbox"/> How the model can be used to understand mental health and mental health disorders <input type="checkbox"/> The benefits and limitations of using the model to understand mental health and mental health disorders
4.2 The biopsychosocial model	
<ul style="list-style-type: none"> <input type="checkbox"/> Features <input type="checkbox"/> Benefits and limitations 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> The key features of the model <input type="checkbox"/> How the model can be used to understand mental health and mental health disorders <input type="checkbox"/> The benefits and limitations of using the model to understand mental health and mental health disorders
4.3 The trauma model	
<ul style="list-style-type: none"> <input type="checkbox"/> Features <input type="checkbox"/> Benefits and limitations 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> The key features of the model <input type="checkbox"/> How the model can be used to understand mental health and mental health disorders <input type="checkbox"/> The benefits and limitations of using the model to understand mental health and mental health disorders
4.4 The subjective wellbeing model	
<ul style="list-style-type: none"> <input type="checkbox"/> Subjective Wellbeing (Diener, 1984): <ul style="list-style-type: none"> • Frequent positive affect • Infrequent negative affect • Cognitive evaluations 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> The key features of the model <input type="checkbox"/> How the model can be used to understand wellbeing <input type="checkbox"/> The benefits and limitations of using the model to understand wellbeing

Topic Area 5: Mental health issues and disorders	
Teaching content	Breadth and depth
5.1 Recognising changes in mental health	
5.1.1 Emotional:	
<ul style="list-style-type: none"> <input type="checkbox"/> Common emotional signs: <ul style="list-style-type: none"> • Anger • Irritability • Low mood • Mood swings • Worry 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Know the common emotional signs of mental health changes <input type="checkbox"/> That different people can display emotional signs of mental health changes in different ways <input type="checkbox"/> That emotional changes in mental health can appear alongside cognitive, physical and behavioural changes
5.1.2 Cognitive:	
<ul style="list-style-type: none"> <input type="checkbox"/> Common cognitive signs: <ul style="list-style-type: none"> • Impaired functioning: <ul style="list-style-type: none"> ○ Difficulty concentrating ○ Finding it difficult to make decisions ○ Negative thought patterns ○ Poor motivation 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Know the common cognitive signs of mental health changes <input type="checkbox"/> That different people can display cognitive signs of mental health changes in different ways <input type="checkbox"/> That cognitive changes in mental health can appear alongside emotional, physical and behavioural changes

<p>5.1.3 Physical:</p> <ul style="list-style-type: none"> □ Common physical signs: <ul style="list-style-type: none"> • Digestive issues • Fatigue • Headaches • Muscle tension and soreness • Sleep disturbance 	<p>To include:</p> <ul style="list-style-type: none"> □ Know the common physical signs of mental health changes □ That different people can display physical signs of mental health changes in different ways □ That physical changes in mental health can appear alongside emotional, cognitive and behavioural changes
<p>5.1.4 Behavioural:</p> <ul style="list-style-type: none"> □ Common behavioural signs: <ul style="list-style-type: none"> • Losing interest in hobbies • Self-harm • Substance use • Withdrawal from society 	<p>To include:</p> <ul style="list-style-type: none"> □ Know the common behavioural signs of mental health changes □ That different people can display behavioural signs of mental health changes in different ways □ That behavioural changes in mental health can appear alongside emotional, cognitive and physical changes
5.2 Common mental health disorders	
<ul style="list-style-type: none"> □ Categories of disorder: <ul style="list-style-type: none"> • Mood disorders • Anxiety disorders • Personality disorders • Psychotic disorders • Eating disorders • Trauma-related disorders • Substance abuse disorders □ Common disorders: <ul style="list-style-type: none"> • Generalised anxiety disorder (GAD) • Depression • Panic disorder • Obsessive compulsive disorder (OCD) • Post-traumatic stress disorder (PTSD) □ Level of severity: <ul style="list-style-type: none"> • None • Mild • Moderate • Severe 	<p>To include:</p> <ul style="list-style-type: none"> □ Know how disorders can be categorised □ How the common disorders are categorised □ What each common disorder is □ The main symptoms of each common disorder □ How each common disorder can affect everyday life □ That disorders can be experienced at different levels of severity at different times
5.3 Treatments and therapies for common mental health disorders	
<ul style="list-style-type: none"> □ Counselling □ Psychotherapy: <ul style="list-style-type: none"> • Cognitive behavioural therapy (CBT) <ul style="list-style-type: none"> ○ Cognitive triangle • Eye movement desensitisation and reprocessing (EMDR) □ Medication: <ul style="list-style-type: none"> • Selective Serotonin Reuptake Inhibitors (SSRI) antidepressants • Minor tranquilisers • Mood stabilisers □ Electro convulsive therapy (ECT) □ Social prescribing □ Creative therapies 	<p>To include:</p> <ul style="list-style-type: none"> □ Know treatments and therapies that can be used for common mental health disorders □ The main features of the different types of treatments and therapies □ The advantages and disadvantages of different treatments and therapies □ The effect of the different medications on synaptic transmission □ How the cognitive triangle can be used in cognitive behaviour therapy in the treatment of common mental health disorders

<ul style="list-style-type: none"> □ Alternative therapies □ Complementary therapies 	<ul style="list-style-type: none"> □ How the cognitive triangle can be used to understand the relationship between thoughts, emotions and behaviour □ How a course of treatment for common mental disorders will depend on the individual and can involve one or more treatments and/or therapies <p>Does not include:</p> <ul style="list-style-type: none"> □ Other types of medication
--------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Topic Area 6: Strategies for managing mental health and wellbeing	
Teaching content	Breadth and depth
6.1 Managing physical wellbeing	
<ul style="list-style-type: none"> □ Strategies for managing physical wellbeing: <ul style="list-style-type: none"> • Developing good sleep habits: <ul style="list-style-type: none"> ○ Improving sleep quality ○ Improving sleep quantity ○ Avoiding use of blue light emitting devices before sleeping • Maintaining a healthy lifestyle: <ul style="list-style-type: none"> ○ Healthy eating ○ Regular exercise • Avoiding negative coping strategies: <ul style="list-style-type: none"> ○ Avoiding comfort eating ○ Avoiding substance misuse 	<p>To include:</p> <ul style="list-style-type: none"> □ Practical approaches for each strategy □ The potential consequences on physical wellbeing of poor approaches to managing physical health □ How the different strategies can help to improve mental health and wellbeing
6.2 Managing mental and emotional wellbeing	
<ul style="list-style-type: none"> □ Mindfulness: <ul style="list-style-type: none"> • Mindfulness techniques for managing emotions: <ul style="list-style-type: none"> ○ Grounding technique ○ Searching for glimmers ○ STOPP technique □ Outdoor activities □ Physical activities □ Relaxation activities □ Strategies for managing emotions: <ul style="list-style-type: none"> • Building positive mindsets • Building self-esteem • Self-reflection • Understanding adversity 	<p>To include:</p> <ul style="list-style-type: none"> □ What mindfulness is □ How activities can be done in a mindful way □ The main features of each mindfulness technique □ How relaxation activities and doing activities in a mindful way affects the parasympathetic nervous system and potentially improves wellbeing □ How outdoor and physical activities affect stress hormones and potentially improve wellbeing □ How mindfulness, outdoor, physical and relaxation activities affect synaptic transmission and potentially improve cognitive function □ Practical approaches for each strategy □ How the different strategies can help to improve mental health and wellbeing

6.3 Managing social wellbeing	
<ul style="list-style-type: none"> □ Social interaction: <ul style="list-style-type: none"> • Levels of social interaction □ The value of positive relationships □ Strategies for positive relationships: <ul style="list-style-type: none"> • Boundaries and respect • Communication • Mutual trust □ Strategies for managing digital interactions: <ul style="list-style-type: none"> • Positive online interactions • Set boundaries for screen time • Selective use of social media • Digital detox 	<p>To include:</p> <ul style="list-style-type: none"> □ That different people need different levels of social interaction at different times □ How positive relationships promote positive mental health and wellbeing □ How unhealthy relationships can affect mental health and wellbeing □ Practical approaches for each strategy □ How the different strategies can help to improve mental health and wellbeing □ The potential consequences of poor approaches to managing digital interactions □ How the different strategies for managing digital interactions can help to improve mental health and wellbeing

Assessment guidance

This unit is assessed by an exam. The exam is 1 hours and 45 minutes and has 70 marks in total. All questions in the exam are compulsory.

The exam will **always** have:

Questions to assess Performance Objectives 1, 2, and 3	<ul style="list-style-type: none"> • PO1: these questions will require students to recall generic knowledge and understanding. • PO2: these questions will require students to apply knowledge and understanding. • PO3: these questions will require students to analyse and evaluate knowledge, understanding and performance in relation to the scenario.
A range of question types	<ul style="list-style-type: none"> • Forced choice/controlled response questions. • Short answer, closed response questions. • Extended constructed response questions with points-based marks schemes. • Extended constructed response questions with levels of response marks schemes.
Questions relating to each Topic Area	<ul style="list-style-type: none"> • Content will be sampled from all topic areas, with at least one question or part question relating to each topic area.

This will be conducted under examination conditions. For more details refer to the [Administration area](#).

A range of question types will be used in the exam.

The Mental Health and Wellbeing [Guide to our Sample Assessment Material](#) gives more information about the layout and expectations of the exam.

The exam for this unit assesses the following Performance Objectives:

- PO1 – Show knowledge and understanding
- PO2 – Apply knowledge and understanding
- PO3 – Analyse and evaluate knowledge, understanding and performance.

Synoptic assessment

This unit allows students to gain underpinning knowledge and understanding relevant to the qualification and sector. The NEA units draw on and strengthen this learning with students applying their learning in an applied way.

The following NEA units have synoptic links with this unit. The synoptic grids at the end of these NEA units show these synoptic links.

- F402: Supporting and promoting mental health and wellbeing in organisations
- F403: Community-based support for mental health and wellbeing
- F404: Supporting mental health and wellbeing with physical activity
- F405: Supporting mental health and wellbeing with outdoor and creative activities

More information about synoptic assessment in these qualifications can be found in [Section 6.2 Synoptic Assessment](#).

DRAFT

5.2.2 Unit F401: Mental health, wellbeing and society

Unit aim

Mental health and wellbeing can be affected by many factors in society. These factors impact on each of us differently depending on our personal circumstances. There are many societal factors that influence us and have an impact on our lives. The communities we are a part of and the structures and systems that exist all have a bearing on shaping our lives and our mental health and wellbeing. Society is complex and constantly changing, and the way that we view and treat people with mental health disorders is changing also.

In this unit you will learn about what society is and what shapes societies. You will learn about how views on mental health in society have changed over time, including how attitudes to people with mental health disorders and approaches to care have evolved. You will learn about mental health and wellbeing in society today, including how it is measured, how to interpret data and trends about mental health and wellbeing, and how this data can be used to understand inequalities in the diagnosis of and provision of treatment for mental health disorders. You will learn about significant societal influences on mental health and wellbeing and the ways that these are being addressed.

Unit F401: Mental health, wellbeing and society	
Topic Area 1: Evolving perceptions of mental health in society	
Teaching content	Breadth and depth
1.1 Understanding society	
1.1.1 Societies and communities: <ul style="list-style-type: none"> □ Society: <ul style="list-style-type: none"> • Characteristics: <ul style="list-style-type: none"> ○ Shared values ○ Structures ○ Systems • Types of society: <ul style="list-style-type: none"> ○ Collectivist ○ Individualist □ Community: <ul style="list-style-type: none"> • Types: <ul style="list-style-type: none"> ○ Cultural ○ Online ○ Geographical □ Demographic variables: <ul style="list-style-type: none"> • Age • Ethnicity • Gender • Level of education • Location • Occupation • Socioeconomic status 	To include: <ul style="list-style-type: none"> □ What a society is □ The different characteristics of a society □ That the different structures influence society □ What a community is □ The different types of community □ Know the characteristics of individualist and collectivist society □ Know what demographic variables are □ That the demographic composition of societies and communities can vary
1.1.2 Systems in a society: <ul style="list-style-type: none"> □ Economic □ Legal □ Political 	To include: <ul style="list-style-type: none"> □ Know the different systems that exist in a society □ Know the purpose of each system in a society
1.1.3 Structures in a society: <ul style="list-style-type: none"> □ Class □ Family □ Religion 	To include: <ul style="list-style-type: none"> □ Know the different structures that exist in a society □ Know the role of each structure in a society

<p>1.1.4 Shared values:</p> <ul style="list-style-type: none"> □ Beliefs □ Cultures □ Social constructs □ Social norms 	<p>To include:</p> <ul style="list-style-type: none"> □ Know what a value is □ Where values can come from □ Know what a social norm is □ Know what a social construct is □ That different groups in a society can have different values □ That values, systems and structures in a society can influence each other
<p>1.2 Societal systems and mental health support</p>	
<ul style="list-style-type: none"> □ The impact of societal systems on mental health support: <ul style="list-style-type: none"> • Economic: <ul style="list-style-type: none"> ○ Resource allocation • Legal: <ul style="list-style-type: none"> ○ Legislation • Political: <ul style="list-style-type: none"> ○ Political policies 	<p>To include:</p> <ul style="list-style-type: none"> □ How the different societal systems determine the level and nature of mental health support in society <p>Does not include:</p> <ul style="list-style-type: none"> □ Detailed understanding of specific resource allocation, legislation, and political policies

<p>Topic Area 2: Societal developments and mental health</p>	
<p>Teaching content</p>	<p>Breadth and depth</p>
<p>2.1 Changing social constructs and norms</p>	
<ul style="list-style-type: none"> □ Historical social constructs of mental disorders: <ul style="list-style-type: none"> • Imbalance in the four humors in Ancient Greece • Supernatural causes in medieval times □ Current social constructs: <ul style="list-style-type: none"> • Mental health disorder □ Changing social norms and mental health: <ul style="list-style-type: none"> • Homosexuality • Post-traumatic stress disorder (PTSD) 	<p>To include:</p> <ul style="list-style-type: none"> □ That atypical behaviours linked to mental health disorders in Ancient Greece were viewed as an imbalance of the four humors □ That atypical behaviours linked to mental health disorders in medieval times were viewed as witchcraft or demonic possession □ How mental health disorders are currently viewed □ How historical social norms led to homosexuality being categorised as mental illness □ How historical social norms led to PTSD not being recognised as a mental health disorder □ That social norms have changed over time
<p>2.2 Developments in the treatment of people with mental health disorders</p>	
<ul style="list-style-type: none"> □ Historical approaches (c.1400s–1700s): <ul style="list-style-type: none"> • Attitude: <ul style="list-style-type: none"> ○ Viewed as moral failing or supernatural or religious causes ○ That people showing signs of mental health disorders should be kept away from society • Key developments: <ul style="list-style-type: none"> ○ Bethlam Hospital becomes first hospital specialising in mental illness (1403) ○ Mental hospitals and asylums became more widespread (1600s and 1700s) 	<p>To include:</p> <ul style="list-style-type: none"> □ How and why society’s attitudes towards people with mental health disorders has changed over time □ Know the main purpose of the stated acts □ How the key developments impacted on people with mental health disorders □ How and why approaches to care for people with mental health disorders have changed over time □ How society’s attitudes impacted on approaches to care for people with mental health disorders

<ul style="list-style-type: none"> • Approach to care: <ul style="list-style-type: none"> ○ Focus on containment, physical restraint and punishment ○ Inhumane conditions ○ Limited medical treatment that was sometimes brutal □ Asylum reform (c.1800s): <ul style="list-style-type: none"> • Attitudes: <ul style="list-style-type: none"> ○ Beginnings of recognition of mental health disorders ○ Viewed as needing compassionate treatment • Key developments: <ul style="list-style-type: none"> ○ County Asylum Act (1808) ○ County Asylums Act and Lunacy Act (1845) • Approach to care: <ul style="list-style-type: none"> ○ The moral treatment system ○ No advances in medical treatment □ Introduction of modern approaches (c.1900s): <ul style="list-style-type: none"> • Attitudes: <ul style="list-style-type: none"> ○ Increasing recognition of mental health disorders • Key developments: <ul style="list-style-type: none"> ○ Mental Treatment Act (1930) ○ Mental hospitals become increasingly overcrowded making ‘the moral treatment’ hard to maintain • Approach to care: <ul style="list-style-type: none"> ○ New approaches to treatment including psychopharmacology and psychotherapy □ Current approaches: <ul style="list-style-type: none"> • Attitude: <ul style="list-style-type: none"> ○ Greater understanding and acceptance of mental health disorders • Key developments: <ul style="list-style-type: none"> ○ Shift of focus from care in institutions to the community • Approach to care: <ul style="list-style-type: none"> ○ Person-centred ○ Community-based ○ Wide variety of therapies and treatments 	<p>Does not include:</p> <ul style="list-style-type: none"> □ Details of treatments □ Knowing the detailed content of each act
<p>2.3 Mental health legislation and the NHS Long Term Plan</p>	
<ul style="list-style-type: none"> □ Mental health legislation: <ul style="list-style-type: none"> • Mental Capacity Act • Mental Health Act □ Workplace legislation: <ul style="list-style-type: none"> • Equality Act • Health and safety at work Act 	<p>To include:</p> <ul style="list-style-type: none"> □ Know the main purpose(s) of each act □ Know the latest version of each act □ How workplace legislation protects the rights of individuals in relation to their mental health □ Know the main purpose(s) of the NHS Long Term Plan in relation to mental health and wellbeing

<ul style="list-style-type: none"> □ NHS Long Term Plan (2019): <ul style="list-style-type: none"> • Increase funding for mental health services • Make it easier and quicker for people to receive mental health crisis care • Improve access to talking therapies • Increase alternative forms of crisis support • More mental health support in the community for people with severe mental health problems 	<p>Does not include:</p> <ul style="list-style-type: none"> □ Knowing the detailed content of each act/regulation □ Detailed knowledge of the NHS long term plan or how it will be implemented
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Topic Area 3: Society today	
Teaching content	Breadth and depth
3.1 National wellbeing today	
<ul style="list-style-type: none"> □ Wellbeing in the United Kingdom (UK): <ul style="list-style-type: none"> • Measuring national wellbeing: <ul style="list-style-type: none"> ○ National wellbeing dashboard ○ Interpreting trends in wellbeing data 	<p>To include:</p> <ul style="list-style-type: none"> □ How levels of national wellbeing are currently measured □ Why levels of national wellbeing are measured □ How to interpret trends in national wellbeing data □ How data from each category of the National Wellbeing Dashboard can be used as an indicator of national wellbeing levels □ How data on levels of national wellbeing can be used in decision-making □ The limitations of national wellbeing data <p>Does not include:</p> <ul style="list-style-type: none"> □ Memorising numerical data □ Memorising a list of categories from the National Wellbeing Dashboard
3.2 Mental health support today	
<ul style="list-style-type: none"> □ Mental health support providers in the UK: <ul style="list-style-type: none"> • NHS • Private sector providers • Charities • Not-for profit organisations □ Public health campaigns: <ul style="list-style-type: none"> • Definition • Purposes • Use • Aims of a public health campaign: <ul style="list-style-type: none"> ○ Protection ○ Promotion ○ Prevention • Expected impact • Benefits and limitations 	<p>To include:</p> <ul style="list-style-type: none"> □ The types of support that each provider offers □ What a public health campaign is □ The purpose of public health campaigns □ How public health campaigns are used to address mental health issues in society □ How the aims of a public health campaign can influence content and messaging □ The expected impact of public health campaigns on the prevalence/incidence of mental health issues and disorders □ The expected impact of public health campaigns on referrals to mental health support services □ The benefits and limitations of using public health campaigns as a way to address mental health issues and disorders

	<p>Does not include:</p> <ul style="list-style-type: none"> □ Memorising facts and figures about levels of mental health support
<p>3.3 Understanding trends in mental health</p>	
<ul style="list-style-type: none"> □ Measuring levels of mental health disorders: <ul style="list-style-type: none"> • Prevalence • Lifetime prevalence • Incidence □ Measuring levels of mental health support: <ul style="list-style-type: none"> • Funding levels • Number of referrals to mental health support services • Waiting times from referral to access of mental health support services □ Factors that can lead to changes in the prevalence or incidence of mental health disorders: <ul style="list-style-type: none"> • Attitudes to mental health and willingness to seek help • Current societal issues • Impact of public health campaigns • Levels of mental health support □ Factors that can lead to changes in levels of mental health support: <ul style="list-style-type: none"> • Changes in government priorities and/or policies • Healthcare budgets • Number of people seeking mental health support 	<p>To include:</p> <ul style="list-style-type: none"> □ The different ways that levels of mental health disorders are measured □ Know that prevalence is the number of people with a particular diagnosis at a given time □ Know that lifetime prevalence is the number of people who have experienced a particular mental health disorder at any time in their lives □ Know that incidence is the number of new cases of a particular mental health disorder that appear in a given time period □ How to interpret data on levels of mental health disorders □ The different ways that levels of support for people with mental health disorders can be measured □ How to interpret data on levels of support for people with mental health disorders □ That individuals don't always seek help for mental health issues and that data may not reflect the full picture of the incidence of mental health disorders □ How the different factors can lead to changes in the prevalence or incidence of mental health disorders □ How the different factors can lead to changes in the levels of mental health support
<p>3.4 Mental health inequalities</p>	
<ul style="list-style-type: none"> □ Areas of inequality: <ul style="list-style-type: none"> • Inequalities in diagnosis • Inequalities in treatment □ Demographic groups: <ul style="list-style-type: none"> • Age • Ethnicity • Gender □ Factors that can lead to inequalities: <ul style="list-style-type: none"> • Health behaviours: <ul style="list-style-type: none"> ○ Lifestyle choices ○ Willingness to seek medical advice • Compliance with social norms • Bias and stereotyping by medical practitioners: <ul style="list-style-type: none"> ○ Conscious bias ○ Unconscious bias • Lack of accessible information □ Lack of representation in service provision 	<p>To include:</p> <ul style="list-style-type: none"> □ How the different factors can lead to inequalities in the diagnosis of mental health disorders in the different demographic groups □ How the different factors can lead to inequalities in the treatment of mental health disorders in the different demographic groups □ What is meant by stereotyping and bias □ The difference between stereotyping and bias □ How stereotyping can lead to bias □ The difference between conscious and unconscious bias <p>Does not include:</p> <ul style="list-style-type: none"> □ Inequalities in other demographic groups

Topic Area 4: Current influences on the mental health and wellbeing of society	
Teaching content	Breadth and depth
4.1 The influence of different media forms on the mental health and wellbeing of society	
<ul style="list-style-type: none"> □ Forms: <ul style="list-style-type: none"> • Advertising and marketing • Film and television • News programming • Video games □ Portrayal and perception of mental health □ Theories: <ul style="list-style-type: none"> • Bandura’s media effects theory • Gerbner’s cultivation theory 	<p>To include:</p> <ul style="list-style-type: none"> □ Know the different media forms □ The positive and negative impacts of each media form on mental health and wellbeing □ That people are affected differently by the different media forms depending on their own mental health and wellbeing levels □ How the portrayal of mental health by the different media forms can contribute to society’s views of mental health □ The main features of each theory □ How each theory can explain the influence of media on mental health and wellbeing □ How each theory can explain the influence of media on society’s views on mental health and wellbeing
4.2 The influence of social media on the mental health and wellbeing of society	
<ul style="list-style-type: none"> □ Platforms □ Positive uses of social media: <ul style="list-style-type: none"> • Access to information and education • Platform for civic engagement • Platform for emotional support • Platform for social connection □ Negative uses of social media: <ul style="list-style-type: none"> • Normalising of negative behaviours • Spreading of harmful content • Spreading of misinformation • Unhealthy social media use □ Theories explaining how social media use can affect mental health: <ul style="list-style-type: none"> • Social comparison theory: <ul style="list-style-type: none"> ○ Upward social comparison ○ Downward social comparison • Turkle’s tethered self theory • Uses and gratifications theory 	<p>To include:</p> <ul style="list-style-type: none"> □ Know examples of the different social media platforms □ How the positive and negative uses of social media can affect the mental health and wellbeing of society □ How people are affected differently by social media depending on their own mental health and wellbeing levels □ The main features of social comparison theory □ How social comparison theory links to social media use □ The main features of tethered self theory □ How tethered self theory links to social media use □ The main features of uses and gratifications theory □ How uses and gratifications theory links to social media use
4.3 Managing social media	
<ul style="list-style-type: none"> □ Legislation and regulation: <ul style="list-style-type: none"> • OFCOM • Online Safety Act □ Self-regulation: <ul style="list-style-type: none"> • Actions on harmful content • Codes of practice • Monitoring user activity 	<p>To include:</p> <ul style="list-style-type: none"> □ Know the latest version of the Act □ Know the main purpose of the Act □ Know the role of the regulator in relation to social media □ How the regulation of social media differs from the regulation of broadcast media □ How the legislation and regulation are intended to protect mental health and wellbeing □ Know what self-regulation is □ How self-regulation can be used by providers to manage the use and content of social media

	<ul style="list-style-type: none"> <input type="checkbox"/> How self-regulation can be used to manage the impact of social media on the mental health of users <p>Does not include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Knowing the detailed content of the Act
4.4 The influence of environmental and global issues on the mental health and wellbeing of society	
<ul style="list-style-type: none"> <input type="checkbox"/> Issues: <ul style="list-style-type: none"> • Environmental: <ul style="list-style-type: none"> ○ Climate anxiety • Global: <ul style="list-style-type: none"> ○ Pandemics ○ War <input type="checkbox"/> The influence of media forms and social media 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> The different ways that environmental and global issues can affect mental health <input type="checkbox"/> That these are societal issues that affect everyone, but that the impact on mental health and wellbeing is different for different individuals and groups of people <input type="checkbox"/> That feelings about environmental and global issues have changed over time <input type="checkbox"/> How the different media forms and social media can influence mental health and wellbeing in relation to environmental and global issues

Assessment guidance

This unit is assessed by an exam. The exam is 1 hours and 15 minutes and has 50 marks in total. All questions in the exam are compulsory.

The exam will **always** have:

Questions to assess Performance Objectives 1, 2, and 3	<ul style="list-style-type: none"> • PO1: these questions will require students to recall generic knowledge and understanding. • PO2: these questions will require students to apply knowledge and understanding. • PO3: these questions will require students to analyse and evaluate knowledge, understanding and performance in relation to the scenario.
A range of question types	<ul style="list-style-type: none"> • Forced choice/controlled response questions. • Short answer, closed response questions. • Extended constructed response questions with points-based marks schemes. • Extended constructed response questions with levels of response marks schemes.
Questions relating to each Topic Area	<ul style="list-style-type: none"> • Content will be sampled from all topic areas, with at least one question or part question relating to each topic area.

This will be conducted under examination conditions. For more details refer to the [Administration area](#).

A range of question types will be used in the exam.

The Mental Health and Wellbeing [Guide to our Sample Assessment Material](#) gives more information about the layout and expectations of the exam.

The exam for this unit assesses the following Performance Objectives:

- PO1 – Show knowledge and understanding
- PO2 – Apply knowledge and understanding
- PO3 – Analyse and evaluate knowledge, understanding and performance.

Synoptic assessment

This unit allows students to gain underpinning knowledge and understanding relevant to the qualification and sector. The NEA units draw on and strengthen this learning as students will apply their learning to applied tasks.

The following NEA units have synoptic links with this unit. The synoptic grids at the end of these NEA units show these synoptic links.

- F403: Community-based support for mental health and wellbeing
- F404: Supporting mental health and wellbeing with physical activity
- F405: Supporting mental health and wellbeing with outdoor and creative activities

More information about synoptic assessment in these qualifications can be found in [Section 6.2 Synoptic Assessment](#).

DRAFT

5.3 NEA Units

5.3.1 Unit F402: Supporting and promoting mental health and wellbeing in organisations

Unit Aim

Mental health issues significantly impact UK organisations and the wider economy, through lost work days. While work can provide income, purpose, and social connections, it can also worsen employees' mental health, through job burnout; stress; and unemployment issues. Improving employees' mental health, through creating more healthy workplaces and providing the tools needed to manage their own mental health better is a key NHS priority to boost national productivity.

In this unit you will learn about how organisations support the mental health of their employees. You will learn about the features of work that can have an impact on mental health. You will also learn about good practice for improving mental health and the factors affecting employees in the workplace. Finally, you will learn how issues outside of work affect mental health and wellbeing in everyday life and ways to address these positively in an organisational setting.

Unit F402: Supporting and promoting mental health and wellbeing in organisations	
Topic Area 1: Mental health, wellbeing and the workforce	
Teaching content	Exemplification
1.1 The importance of the mental health and wellbeing of a workforce	
<ul style="list-style-type: none"> □ Aspects of an organisation affected by the mental health and wellbeing of the workforce: <ul style="list-style-type: none"> • Attendance • Costs • Customer service • Job satisfaction • Productivity • Reputation • Sense of belonging • Staff turnover □ Mental health issues or disorders commonly associated with work □ How attitudes to employee mental health and wellbeing are changing: <ul style="list-style-type: none"> • Awareness of its importance • Employing/appointing specialists to oversee and promote mental health and wellbeing in an organisation • Reducing stigma 	<p>To include:</p> <ul style="list-style-type: none"> □ How mental health and wellbeing affects the different aspects of the organisation for the employer and the employee □ How mental health issues affect the different aspects of the organisation for the employer and the employee □ That mental health issues and disorders can be caused or be exacerbated by work □ That organisations can support people with existing mental health issues and disorders at work □ The different ways that attitudes to employee mental health and wellbeing are changing <p>Examples of mental health issues or disorders commonly associated with work may include:</p> <ul style="list-style-type: none"> □ Anxiety □ Burnout □ Depression □ Generalised Anxiety Disorder (GAD) □ Low mood □ Stress

1.2 The impact of organisational features on mental health and wellbeing	
<ul style="list-style-type: none"> <input type="checkbox"/> Scale of operation: <ul style="list-style-type: none"> • Local • National • International <input type="checkbox"/> Size of organisation: <input type="checkbox"/> Organisational structure: <ul style="list-style-type: none"> • Formal (hierarchy) • Informal <input type="checkbox"/> Employment status <input type="checkbox"/> Working environments: <ul style="list-style-type: none"> • Home-based • Hybrid • Manual (indoors) • Manual (outdoors) • Office • Remote <input type="checkbox"/> Working patterns: <ul style="list-style-type: none"> • Full-time • Part-time • Shift work • Flexible working 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> That all organisations are different <input type="checkbox"/> How the different features of an organisation can impact on the mental health and wellbeing of employees <p>Examples of employment status may include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Employee: <ul style="list-style-type: none"> • Permanent • Temporary <input type="checkbox"/> Worker: <ul style="list-style-type: none"> • Casual • Freelance • Zero-hours
1.3 Communication and its impact on mental health and wellbeing	
<ul style="list-style-type: none"> <input type="checkbox"/> Communication methods: <ul style="list-style-type: none"> • Verbal • Visual • Written <input type="checkbox"/> Communication channels <input type="checkbox"/> Amount of communication <input type="checkbox"/> Impacts on individuals 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> How organisations communicate: <ul style="list-style-type: none"> • Central communication • Colleague to colleague <input type="checkbox"/> How the features of an organisation affect choice of communication methods <input type="checkbox"/> The different ways that the communication can impact mental health and wellbeing <input type="checkbox"/> How the amount of communication received can affect mental health and wellbeing <p>Examples of communication channels may include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Email <input type="checkbox"/> Instant messaging: <ul style="list-style-type: none"> • SMS • Teams • WhatsApp) <input type="checkbox"/> Intranet <input type="checkbox"/> Letters <input type="checkbox"/> Meetings: <ul style="list-style-type: none"> • In-person • Remote <input type="checkbox"/> Social media <input type="checkbox"/> Telephone <p>Examples of impacts on individuals may include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Anxiety <input type="checkbox"/> Low mood <input type="checkbox"/> Stress

1.4 Factors influencing the mental health and wellbeing of a workforce	
<p>1.4.1 How employees are affected by internal factors:</p> <ul style="list-style-type: none"> □ Organisational factors: <ul style="list-style-type: none"> • Systems and processes of the organisation: <ul style="list-style-type: none"> ○ Appraisal systems ○ Levels of autonomy ○ Levels of supervision ○ Opportunities for progression ○ Pay and reward systems ○ Policies and procedures ○ Use of technology • Workload □ Cultural factors of the organisation: <ul style="list-style-type: none"> • Attitudes of employees • Attitudes of managers • Management styles • Team dynamics • Employee involvement in decision-making • Support networks 	<p>To include:</p> <ul style="list-style-type: none"> □ How the different factors influence mental health and wellbeing
<p>1.4.2 How the employees are affected by factors external to the organisation:</p> <ul style="list-style-type: none"> □ Environmental and global issues □ Existing mental disorders □ Financial worries □ Personal circumstances □ Physical health 	<p>To include:</p> <ul style="list-style-type: none"> □ How the different factors influence mental health and wellbeing
1.5 Good practice for supporting mental health and wellbeing	
<ul style="list-style-type: none"> □ Core standards from Thriving at Work report: <ul style="list-style-type: none"> • Produce, implement and communicate a mental health at work plan • Develop mental health awareness among employees • Encourage open conversations about mental health and the support available when employees are struggling • Provide employees with good working conditions • Promote effective people management • Routinely monitor employee mental health and wellbeing 	<p>To include:</p> <ul style="list-style-type: none"> □ How the standards support the mental health and wellbeing of a workforce

Topic Area 2: Influencing the mental health and wellbeing of a workforce	
Teaching content	Exemplification
2.1 Having a clear strategy for improving mental health and wellbeing	
<ul style="list-style-type: none"> □ Mental health at work plan: <ul style="list-style-type: none"> • What it is • Purpose • Benefits □ Elements of a mental health a work plan: <ul style="list-style-type: none"> • Working conditions and policies • Supporting the mental health and wellbeing of the workforce <ul style="list-style-type: none"> ○ Developing mental health awareness ○ Encouraging open conversations ○ Promoting effective people management 	<p>To include:</p> <ul style="list-style-type: none"> □ What a mental health at work plan is □ The purpose of a mental health at work plan and how they are used by organisations □ How a mental health at work plan can benefit an organisation and its employees
2.2 Improving working conditions and policies	
<ul style="list-style-type: none"> □ Changing pay and rewards: <ul style="list-style-type: none"> • Levels • Links to performance □ Improving the physical environment: <ul style="list-style-type: none"> • Employee control over the work environment • Lighting and temperature • Office furniture • Office layout □ Modifying levels of supervision □ Reviewing job design: <ul style="list-style-type: none"> • What work is done • How work is organised • How people work together • Work/life balance □ Improving job security: <ul style="list-style-type: none"> • Types of contract offered • Length of contracts □ Improving development opportunities: <ul style="list-style-type: none"> • Offering training □ Linking training to development goals 	<p>To include:</p> <ul style="list-style-type: none"> □ The different ways that working conditions can affect mental health and wellbeing □ How working conditions can be modified to improve mental health and wellbeing □ How these modifications improve mental health and wellbeing
2.3 Supporting the mental health and wellbeing of the workforce	
<p>2.3.1 Developing mental health awareness:</p> <ul style="list-style-type: none"> □ Information and support □ Employing/appointing specialists 	<p>To include:</p> <ul style="list-style-type: none"> □ How the different sources and types of information and support can be used to develop mental health awareness □ When the different sources and types of information and support are appropriate □ The benefits and limitations of the different types of information and support □ How the different specialists can help to develop mental health awareness <p>Examples of information and support may include:</p> <ul style="list-style-type: none"> □ Employee assistance portals □ External speakers/consultants □ Management training

	<ul style="list-style-type: none"> <input type="checkbox"/> Peer support and mentoring <input type="checkbox"/> Staff training <input type="checkbox"/> Targeted awareness initiatives <input type="checkbox"/> Toolkits and information from government, voluntary organisations and other bodies <input type="checkbox"/> Wellbeing messages <p>Examples of specialists may include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Mental health first aider <input type="checkbox"/> Mental health lead <input type="checkbox"/> Wellbeing ambassadors/champions Wellbeing officers
<p>2.3.2 Encouraging open conversations about mental health and wellbeing:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Approaches to encouraging open conversations 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> The different approaches that can be taken to encourage open conversations about mental health and wellbeing <p>Examples of approaches may include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Creating a non-judgemental environment <input type="checkbox"/> Creating staff networks <input type="checkbox"/> Discussing mental health openly <input type="checkbox"/> Encouraging employees to use sources of information and support <input type="checkbox"/> Encouraging employees to engage with workplace specialists
<p>2.3.3 Promoting effective people management:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Promoting open discussion between managers and employees <input type="checkbox"/> Giving and receiving feedback <input type="checkbox"/> Targeted training and support for managers 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> The different ways that effective people management can be promoted to support mental health and wellbeing <input type="checkbox"/> When the different ways are appropriate
<p>2.4 Monitoring employee mental health and wellbeing</p>	
<ul style="list-style-type: none"> <input type="checkbox"/> Monitoring employee mental health and wellbeing: <ul style="list-style-type: none"> • Wellbeing surveys • Other monitoring tools • Using data from monitoring tools: <ul style="list-style-type: none"> ○ Using data to identify problems ○ Using data to focus support ○ Using data to monitor the impact of change 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Why it is important to monitor employee mental health and wellbeing <input type="checkbox"/> The different ways to monitor employee mental health and wellbeing <input type="checkbox"/> The benefits and limitations of the different monitoring tools <input type="checkbox"/> How the different monitoring tools can be used to identify areas for improvement <p>Examples of other monitoring tools may include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Appraisals <input type="checkbox"/> Focus groups <input type="checkbox"/> Informal conversations <input type="checkbox"/> Interview individual members of staff <input type="checkbox"/> Mentoring <input type="checkbox"/> Mood trackers <input type="checkbox"/> Peer Support <input type="checkbox"/> Supervision sessions

2.5 Designing effective wellbeing monitoring tools	
<ul style="list-style-type: none"> □ Question quality: <ul style="list-style-type: none"> • Clarity • Relevance to the aim of the monitoring tool □ Question types: <ul style="list-style-type: none"> • Open • Closed: <ul style="list-style-type: none"> ○ Fixed choice ○ Likert scale questions ○ Ranking questions ○ Rating questions □ Avoiding bias in monitoring tool design: <ul style="list-style-type: none"> • Anonymity • Neutral questions □ Ethical issues in monitoring tool design: <ul style="list-style-type: none"> • Audience sensitivity • Confidentiality □ Testing the effectiveness of monitoring tools: <ul style="list-style-type: none"> • Collecting appropriate feedback 	<p>To include:</p> <ul style="list-style-type: none"> □ How the quality of questions in a wellbeing monitoring tool can influence the quality of data collected □ How to write good quality questions for a wellbeing monitoring tool □ How the different question types can be used to create an effective monitoring tool to understand mental health and wellbeing □ Why it's important to avoid bias in monitoring tool design □ How the different ethical issues affect the design of monitoring tools □ How to use feedback to test the effectiveness of monitoring tools
2.6 Barriers to change	
<ul style="list-style-type: none"> □ Barriers: <ul style="list-style-type: none"> • Lack of resources • Existing attitudes and values • Existing culture • Lack of commitment to long-term change • Lack of a clear aim or long-term vision • Inflexible systems or regulations • Not integrating change throughout the whole organisation • Unintentionally excluding people with protected characteristics 	<p>To include:</p> <ul style="list-style-type: none"> □ What each barrier is □ How each barrier affects the successful implementation of a mental health at work plan □ How barriers can be overcome

Topic Area 3: Planning an effective mental health and wellbeing campaign	
Teaching content	Exemplification
3.1 Researching issues affecting mental health and wellbeing	
<ul style="list-style-type: none"> □ Approaches to research: <ul style="list-style-type: none"> • Using accurate, relevant and up-to-date information • Using the internet as an effective research tool • Acknowledging sources □ Accuracy of information: <ul style="list-style-type: none"> • Reliability • Validity □ Sources of information: <ul style="list-style-type: none"> • Existing surveys • Published reports • Websites 	<p>To include:</p> <ul style="list-style-type: none"> □ The importance of the different approaches to research □ How to ensure that sources of information are reliable and valid □ How to find the different sources of information for mental health and wellbeing

3.2 Communicating the campaign	
<ul style="list-style-type: none"> □ Campaign communication methods: <ul style="list-style-type: none"> ○ Audio ○ Audio visual ○ Visual ○ Written □ Campaign formats: <ul style="list-style-type: none"> ● Blog posts ● In-person events/activities ● Intranet pages ● Leaflets ● Online events/activities ● Podcasts ● Posters ● Presentations ● Videos 	<p>To include:</p> <ul style="list-style-type: none"> □ The different communication methods that can be used for a campaign □ Factors influencing the choice of communication method and format □ When the different campaign formats are appropriate □ How the different campaign formats can be tailored for different needs □ The benefits and limitations of the different campaign formats
3.3 Reviewing the campaign content	
<ul style="list-style-type: none"> □ Areas of review: <ul style="list-style-type: none"> ● Appropriateness ● Clarity of message ● Suitability for intended audience □ Feedback methods: <ul style="list-style-type: none"> ● Peer-evaluation: <ul style="list-style-type: none"> ○ Survey ○ Verbal feedback ○ Written feedback ● Self-evaluation 	<p>To include:</p> <ul style="list-style-type: none"> □ How the different feedback methods can be used to collect feedback on the campaign content □ How feedback can be used to inform improvements to the campaign content
3.4 Factors influencing the effectiveness of employer support	
<ul style="list-style-type: none"> □ Severity of issue □ Individual employee circumstances □ Extent of employee engagement □ Quality of information and support 	<p>To include:</p> <ul style="list-style-type: none"> □ How the different factors can affect the extent to which employer support for mental health and wellbeing issues can be effective

Assessment criteria

The table below gives the assessment criteria for the tasks in the set assignment for this unit. The assessment criteria indicate what is required in these tasks.

This qualification has a compensatory approach. This means that the unit grade awarded is based on the **total** number of achieved criteria for the unit (see [Section 6.4](#)). Students do **not** have to achieve **all** criteria for a specific grade to achieve that unit grade (e.g. achieve all Pass criteria to achieve a Pass grade).

[Section 7.4](#) provides full information on how to assess the NEA units and apply the assessment criteria. Students' work must show that all aspects of a criterion have been met in sufficient detail for it to be **successfully achieved** (see [Section 7.4.1](#)). If a student's work does not fully meet a criterion, you must not award that criterion.

The command words used in the assessment criteria are defined in [Appendix B](#).

Pass	Merit	Distinction
<p>P1: Summarise the issues affecting mental health and wellbeing of the employees at the organisation. (PO2)</p>	<p>M1: Explain how the features of the organisation, and to the way it communicates are impacting on the mental health and wellbeing of employees. (PO3)</p>	<p>D1: Discuss how the features, communication and internal factors from M1 and M2 may be contributing to the issues for the organisation. (PO3)</p>
	<p>M2: Explain how the internal factors at the organisation are impacting on the mental health and wellbeing of its employees. (PO3)</p>	
<p>P2: Describe how a mental health at work plan will benefit the organisation. (PO2)</p>		
<p>P3: Outline the areas for improvement targeted by your mental health at work plan. (PO2)</p>	<p>M3: Recommend how the organisation should change the working conditions to improve the mental health and wellbeing of its employees. (PO3)</p>	<p>D2: Justify why the recommendations in M3 are appropriate for the organisation. (PO3)</p>
	<p>M4: Recommend how the organisation could make improvements to the specified area of supporting the mental health and wellbeing of the workforce. (PO3)</p>	<p>D3: Justify why the recommendations in M4 are appropriate for the organisation. (PO3)</p>
<p>P4: Describe barriers to the successful implementation of the mental health at work plan for the organisation. Is this clearer (PO2)</p>	<p>M5: Explain how the barriers in P4 can be overcome. (PO2)</p>	
<p>P5: Create a draft survey to monitor the impact of the mental health at work plan on employee mental health and wellbeing. (PO4)</p>	<p>M6: Explain how your final survey design is effective. (PO4)</p>	<p>D4 Evaluate how effective your survey, along with other monitoring tools, will be for understanding the impact of</p>

Pass	Merit	Distinction
<p>P6: Collect feedback on your draft survey design. (PO4)</p>		<p>the work plan on employee mental health and wellbeing. (PO3)</p>
<p>P7: Create a final version of your survey based on the feedback received in P6. (PO4)</p>		
<p>P8: Describe how two other monitoring tools could be used to monitor mental health and wellbeing in the organisation. (PO2)</p>		
<p>P9: Summarise three key ways the theme can affect mental health and wellbeing. (PO2)</p>		<p>D5: Discuss the extent to which your campaign will support employees' mental health and wellbeing in relation to the theme. (PO3)</p>
<p>P10: Research three strategies and three sources of support that employees can use to help manage their mental health and wellbeing in relation to P9. (PO4)</p>	<p>M7: Explain how the strategies and sources of support in P10 will help employees to manage their mental health and wellbeing in relation to the theme. (PO3)</p>	
<p>P11: Justify why the sources of information that you have used in your research are appropriate, reliable and valid. (PO4)</p>		
<p>P12: Describe the format of your campaign and how it will be communicated to employees at the organisation. (PO4)</p>	<p>M8: Justify why the format and communication method from P12 are appropriate for the organisation. (PO3)</p>	
<p>P13: Collect feedback on your campaign content. (PO4)</p>		<p>D6: Recommend and justify improvements to your campaign based on feedback and self-reflection. (PO3)</p>
<p>P14: Describe other approaches the organisation could use alongside your campaign to support employees' mental health and wellbeing in relation to the theme. (PO2)</p>		

Assessment guidance

This assessment guidance gives you information relating to the assessment criteria. There might not be additional assessment guidance for each assessment criterion. It is included only where it is needed.

Assessment Criteria	Assessment guidance
General	<ul style="list-style-type: none"> Where assessment criteria refer to ‘the organisation’, this is the organisation given in the scenario. Students must apply their answers to the organisation in the scenario. They must not give generic answers. The mental health at work plan is made up of the evidence produced by students for P3, P4, M3, M4, M5, D2 and D3. The research element of the task does not need to be completed under teacher supervised conditions, but it is necessary in order for students to access the criteria.
P1	<ul style="list-style-type: none"> Students must use the information from the scenario.
M1	<ul style="list-style-type: none"> M1 relates to the organisational features in Topic Area 1.2 and communication in Topic Area 1.3. Students must include three points including at least one from Topic Area 1.2 and at least one from Topic Area 1.3.
M2	<ul style="list-style-type: none"> M2 relates to the internal factors from Topic Areas 1.4.1. Students must include three factors that impact the employees at the organisation.
D1	<ul style="list-style-type: none"> Students must relate their discussion to the impact on the organisation. Students must relate their discussion to the points explained in M1 and M2 to achieve this criterion.
P2	<ul style="list-style-type: none"> Students must describe the benefits to the organisation in the scenario of having a mental health at work plan rather than the general benefits of having a mental health at work plan. Students must include two relevant benefits.
P3	<ul style="list-style-type: none"> P3 relates to Topic Areas 2.2 and 2.3. Students must include two areas for improvement relevant to the organisation, including one from each of Topic Area 2.2 and one from Topic Area 2.3.
M3	<ul style="list-style-type: none"> Students must cover both areas of improvement outlined in P3.
M4	<ul style="list-style-type: none"> Students must cover both areas of improvement outlined in P3. The area of support will be specified in the task. The area of support will be taken from Topic Area 2.3.1, 2.3.2, or 2.3.3.
D2	<ul style="list-style-type: none"> There is no assessment guidance for this criterion.
D3	<ul style="list-style-type: none"> There is no assessment guidance for this criterion.
P4	<ul style="list-style-type: none"> P4 relates to Topic Area 2.6. Students must include two barriers relevant to the organisation.
M5	<ul style="list-style-type: none"> Students must cover both barriers described in P4.
P5	<ul style="list-style-type: none"> Surveys must include at least six questions that relate to mental health and wellbeing. Students must include both open and closed question types from Topic Area 2.5.

P6	<ul style="list-style-type: none"> Students must test their draft survey on at least three different people. This can be peers, family or friends. The feedback must be sufficient to allow students to access P7. Feedback should be focused on the factors listed in Topic Area 2.5. Evidence of feedback must be submitted. Where students have received verbal feedback, they must provide notes on this.
P7	<ul style="list-style-type: none"> Students must provide evidence of any adaptations made to the draft survey and the reasons for them. Reasons for adaptations could be provided in the form of an annotated final survey or brief written notes accompanying the final survey. If the student does not consider that adaptations need to be made, or has not addressed some elements of the feedback, they must give reasons for this.
M6	<ul style="list-style-type: none"> M6 relates to Topic Area 2.5. Students must explain how they have considered question types, bias and ethical issues in their survey design.
P8	<ul style="list-style-type: none"> P8 relates to Topic Area 2.4. Students must describe how two monitoring tools (other than wellbeing surveys) could be used. Students can use any relevant monitoring tool and are not limited to the examples listed in Topic Area 2.4.
D4	<ul style="list-style-type: none"> Evaluation must be linked to the monitoring tools described in P8 and the student's own wellbeing survey. The effectiveness of the monitoring tools must be linked to the mental health at work plan.
P9	<ul style="list-style-type: none"> Evidence must relate to the theme specified in the task. Evidence for P9 forms part of the campaign content. Students must summarise three ways the theme affects mental health and wellbeing to achieve the criterion.
P10	<ul style="list-style-type: none"> This criterion relates to the approaches to research in Topic Area 3.1. Students must evidence that they have researched three strategies and three sources of support to achieve this criterion. The strategies and sources of support must relate to the ways summarised in P9. They can address one, two or all three of the ways summarised. Students must use at least three sources of information as part of their research. It is acceptable for these sources to be three different websites. The research must be correctly acknowledged. Research evidence forms part of the campaign content.
M7	<ul style="list-style-type: none"> To achieve this criterion, students must explain how all the strategies and sources of support from P10 will help employees.
P11	<ul style="list-style-type: none"> This criterion relates to Topic Area 3.1. Students must justify why three of the sources of information used in P11 are appropriate, reliable and valid.

P12	<ul style="list-style-type: none"> • P12 is the campaign plan. • The choice of format for the campaign must be appropriate for the organisation. • Students must say how the campaign will be communicated to the employees.
M8	<ul style="list-style-type: none"> • This criterion relates to Topic Area 3.2.
D5	<ul style="list-style-type: none"> • Students must consider how far their campaign will make a difference to employees' mental health and wellbeing in relation to the theme.
P13	<ul style="list-style-type: none"> • P13 relates to Topic Area 3.3. • Students must collect feedback on how successful their campaign content will be in supporting employees in relation to the theme. • It is recommended that students consider D6 when collecting their feedback. • Feedback methods must come from Topic Area 3.3. Evidence of feedback must be submitted. Where students have received verbal feedback, they must provide notes on this.
P14	<ul style="list-style-type: none"> • This criterion relates to Topic Area 2.3.1. • Students must consider other ways that the organisation can support the employees in relation to the theme.
D6	<ul style="list-style-type: none"> • Recommendations must be based on feedback on the campaign content from P13 and self-reflection on the campaign content and overall campaign plan.

Synoptic assessment

Some of the knowledge, understanding and skills needed to complete this unit will draw on the learning in Unit F400.

This table details these synoptic links.

Unit F402: Supporting and promoting mental health and wellbeing in organisations		Unit F400: Fundamentals of mental health and the individual	
Topic Area		Topic Area	
1	Mental health, wellbeing and the workforce	1 3 5	Introducing mental health and wellbeing Factors influencing mental health and wellbeing Mental health issues and disorders
2	Influencing the mental health and wellbeing of a workforce	5 6	Mental health issues and disorders Strategies for managing mental health and wellbeing
3	Planning an effective mental health and wellbeing campaign	5 6	Mental health issues and disorders

			Strategies for managing mental health and wellbeing
--	--	--	-----------------------------------------------------

More information about synoptic assessment in these qualifications can be found in [Section 6.2 Synoptic assessment](#).

DRAFT

5.3.2 Unit F403: Community-based support for mental health and wellbeing

Unit Aim

Social connection is an important factor in our mental health and wellbeing. Sometimes we need help to stay connected. Community-based organisations offer support by promoting social connectedness, healthy lifestyles, and help individuals to overcome personal difficulties. This unit highlights the role of social prescribing in connecting individuals to appropriate community support.

In this unit you will learn the importance of social connectedness and social prescribing in the community. You will learn about the role of the social prescribing link worker, and the benefits, processes and factors affecting social prescribing. and. You will learn the importance of emphasising a person-centred approach to care, the skills needed to support individuals, and local community provisions. You will also explore factors affecting the effectiveness of social prescribing and how outcomes can be measured for the individual.

Unit F403: Community-based support for mental health and wellbeing	
Topic Area 1: Social connectedness	
Teaching content	Exemplification
1.1 Understanding social connectedness	
<ul style="list-style-type: none"> □ Social connectedness: <ul style="list-style-type: none"> • Benefits • The difference between social isolation and loneliness □ Effects of different levels of social connectedness: <ul style="list-style-type: none"> • Mental health effects • Physical health effects • Short- and long-term effects □ Factors influencing levels of social connectedness: <ul style="list-style-type: none"> • Age • Health • Life events • Personal and family circumstances • Employment status • Levels of social activity • Levels of social isolation • Access to support networks 	<p>To include:</p> <ul style="list-style-type: none"> □ What social connectedness is □ The benefits of social connectedness for mental health and wellbeing, and physical health □ The reasons why different people can experience different levels of social connectedness □ How different levels of social connectedness can impact on mental health and wellbeing
1.2 Barriers to improving social connectedness	
<ul style="list-style-type: none"> □ Psychological barriers: <ul style="list-style-type: none"> • Fear of embarrassment • Fear of judgment • Fear of rejection • Lack of motivation □ Barriers to sustaining improvements: <ul style="list-style-type: none"> • Commitment • Engagement • Realistic expectations 	<p>To include:</p> <ul style="list-style-type: none"> □ How the different barriers can limit social connectedness for people at different life stages

1.3 Approaches an individual can take to improving social connectedness	
<ul style="list-style-type: none"> □ Approaches: <ul style="list-style-type: none"> • Skills • Strategies 	<p>To include:</p> <ul style="list-style-type: none"> □ How the different approaches to improving social connectedness can positively impact mental health and wellbeing □ That the value of the different approaches to improving social connectedness will depend on individual circumstances <p>Examples of skills for improving social connectedness may include:</p> <ul style="list-style-type: none"> □ Communication □ Interpersonal <p>Examples of strategies for improving social connectedness may include:</p> <ul style="list-style-type: none"> □ Spending quality time with family and friends □ Joining groups, clubs or classes related to an interest or hobby □ Spending time with others in nature □ Expressing gratitude to others □ Volunteering with an organisation □ Getting involved with the community □ Expanding and diversifying social networks □ Providing social support to others □ Getting to know neighbours □ Making use of screen time

Topic Area 2: Social prescribing and community-based support	
Teaching content	Exemplification
2.1 Understanding needs	
<ul style="list-style-type: none"> □ Types of need: <ul style="list-style-type: none"> • Physical • Intellectual • Emotional • Social • Financial □ Scope of need: <ul style="list-style-type: none"> • Simple • Complex • Short-term • Long-term 	<p>To include:</p> <ul style="list-style-type: none"> □ That the type and scope of need can vary between individuals <p>Examples of physical need may include:</p> <ul style="list-style-type: none"> □ One or more long term health condition □ Physical disability □ Substance abuse <p>Examples of intellectual need may include:</p> <ul style="list-style-type: none"> □ Learning disabilities □ Memory issues □ Understanding the welfare system and processes <p>Examples of emotional need may include:</p> <ul style="list-style-type: none"> □ Anxiety □ Grief □ Low mood □ Low self-confidence □ Low self-esteem <p>Examples of social need may include:</p>

	<ul style="list-style-type: none"> <input type="checkbox"/> Loneliness <input type="checkbox"/> Social isolation <p>Examples of financial need may include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Debt <input type="checkbox"/> Financial pressures
<p>2.2 Understanding social prescribing</p>	
<ul style="list-style-type: none"> <input type="checkbox"/> Social prescribing: <ul style="list-style-type: none"> • What it is • Who is involved • Why it exists • Links to social connectedness <input type="checkbox"/> Personalised care: <ul style="list-style-type: none"> • Choice and control for individuals • Support tailored to individual needs and preferences 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> How the different types of need in Topic Area 2.1 can create a demand for social prescribing <input type="checkbox"/> How social prescribing is used to complement other treatments <input type="checkbox"/> Why social prescribing is used instead of other treatments <input type="checkbox"/> How social prescribing can be used to improve social connectedness <input type="checkbox"/> What personalised care is <input type="checkbox"/> How social prescribing can be used to provide personalised care for individuals <p>Does not include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Detailed study of the origins of social prescribing
<p>2.3 Types of social prescribing</p>	
<ul style="list-style-type: none"> <input type="checkbox"/> Types of social prescribing: <ul style="list-style-type: none"> • Advice, information and guidance • Arts, culture and heritage • Natural environment • Physical • Social groups <input type="checkbox"/> Factors influencing suitability: <ul style="list-style-type: none"> • Appropriateness for needs • Cost • Local availability • Accessibility 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> What the different types of social prescribing can involve <input type="checkbox"/> How the different factors influence the suitability of the different types of social prescribing offered to an individual <p>Examples of advice, information and guidance activities may include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Advocacy <input type="checkbox"/> Debt advice <input type="checkbox"/> Financial management <input type="checkbox"/> Healthy eating advice <input type="checkbox"/> Housing support <input type="checkbox"/> Opportunities to help find paid employment <input type="checkbox"/> Understanding the welfare system <p>Examples of arts, culture, and heritage activities may include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Art classes <input type="checkbox"/> Cinema <input type="checkbox"/> Cookery <input type="checkbox"/> Music groups <input type="checkbox"/> Opportunities to explore heritage <p>Examples of natural environment activities may include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Accessing nature spaces, parks and waterways <input type="checkbox"/> Gardening

	<p>Examples of physical activities may include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Exercise classes <input type="checkbox"/> Swimming <input type="checkbox"/> Walking groups <p>Examples of social group activities may include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Befriending <input type="checkbox"/> Peer support <input type="checkbox"/> Volunteering
2.4 Community-based organisations	
<ul style="list-style-type: none"> <input type="checkbox"/> Organisations that offer opportunities for community-based support: <ul style="list-style-type: none"> • Charities • Statutory agencies • Voluntary, community and social enterprise organisations <input type="checkbox"/> Factors influencing availability of community-based support: <ul style="list-style-type: none"> • Community engagement • Funding • Local partnership arrangements • Workforce/volunteer availability 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> The main purpose of the different organisations <input type="checkbox"/> The types of social prescribing activities the different organisations offer <input type="checkbox"/> How the different factors can influence the variety and number of organisations offering community-based support
2.5 Benefits of social prescribing	
<ul style="list-style-type: none"> <input type="checkbox"/> Benefits to the individual: <ul style="list-style-type: none"> • Physical health • Intellectual • Emotional • Social • Financial 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> How social prescribing can benefit individuals <input type="checkbox"/> How individuals can benefit from social prescribing in different ways depending on the type and scope of their needs <p>Examples of physical health benefits may include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Taking control of your health <input type="checkbox"/> Lessening the impact of long-term health conditions <input type="checkbox"/> Reducing the likelihood of developing long-term health conditions <input type="checkbox"/> Having a more active lifestyle <p>Examples of intellectual benefits may include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Learning new skills <input type="checkbox"/> Developing new knowledge <input type="checkbox"/> Improving school/college/work attendance <input type="checkbox"/> Having a sense of purpose <p>Examples of emotional benefits may include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Gaining confidence <input type="checkbox"/> Having increased motivation <input type="checkbox"/> Happiness <input type="checkbox"/> Getting better at self-management <p>Examples of social benefits may include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Improving quality of life <input type="checkbox"/> Reducing loneliness

	<ul style="list-style-type: none"> □ Having a sense of belonging <p>Examples of financial benefits may include:</p> <ul style="list-style-type: none"> □ Gaining employment □ Having a greater understanding of financial management
2.6 Factors affecting the effectiveness of social prescribing	
<ul style="list-style-type: none"> □ Factors: <ul style="list-style-type: none"> • Cultural considerations • Personal and family circumstances • Readiness to engage • Willingness to engage 	<p>To include:</p> <ul style="list-style-type: none"> □ How each factor can impact on the extent of success of a social prescription

Topic Area 3: Supporting individual needs through social prescribing and community-based support	
Teaching content	Exemplification
3.1 Planning for personalised care and support	
<ul style="list-style-type: none"> □ Person-centred care: <ul style="list-style-type: none"> • Approach • Values • Features 	<p>To include:</p> <ul style="list-style-type: none"> □ What a person-centred approach to care is □ How the values of person-centred care can be used in the development of a plan for personalised care and support <p>Examples of features of person-centred care may include:</p> <ul style="list-style-type: none"> □ What matters to the person – priorities, interests, values, motivations □ What the person can do for themselves to keep well and active □ Assets individuals already have – sources of support, hobbies, skills and passions □ Community support and services the person will be connected to □ What the person can expect of community support and services
3.2 Role of the social prescribing link worker in supporting individuals and communities	
<p>3.2.1 The role of the social prescribing link worker in supporting individuals:</p> <ul style="list-style-type: none"> □ Roles 	<p>To include:</p> <ul style="list-style-type: none"> □ How a social prescribing link worker can support individuals <p>Examples of roles of a social prescribing link worker may include:</p> <ul style="list-style-type: none"> □ Assessing individual needs □ Creating a social prescription/personalised care and support plan □ Setting goals □ Providing personalised support □ Building rapport and trusting relationships □ Providing transport □ Home visits □ Referring and introducing individuals to community services and organisations □ Signposting to wider support

<p>3.2.2 The role of the social prescribing link worker in supporting communities:</p> <ul style="list-style-type: none"> □ Roles 	<p>To include:</p> <ul style="list-style-type: none"> □ How a social prescribing link worker can support communities <p>Examples of roles of a social prescribing link worker may include:</p> <ul style="list-style-type: none"> □ Asset mapping □ Creating local service directories □ Identifying gaps in local community-based support provision □ Liaising with commissioners and local partners
<p>3.2.3 The skills and attributes of a social prescribing link worker:</p> <ul style="list-style-type: none"> □ Skills □ Attributes 	<p>To include:</p> <ul style="list-style-type: none"> □ Why the skills and attributes are important for a social prescribing link worker □ When the different skills and attributes may be needed □ How the skills and attributes can be used in supporting individuals and communities <p>Examples of skills of a social prescribing link worker may include:</p> <ul style="list-style-type: none"> □ Active listening □ Boundary setting □ Coaching and motivational interviewing skills □ Communication skills □ Managing endings □ Working in a person-centred way <p>Examples of attributes a social prescribing link worker may include:</p> <ul style="list-style-type: none"> □ Empathetic □ Emotionally resilient □ Non-judgemental □ Patient
<p>3.3 Measuring the outcomes of social prescribing for individuals</p>	
<ul style="list-style-type: none"> □ Measuring outcomes: <ul style="list-style-type: none"> • NHS Common Outcomes Framework • Areas used to measure outcomes for individuals • The importance of measuring outcomes for the healthcare system 	<p>To include:</p> <ul style="list-style-type: none"> □ What The NHS Common Outcomes Framework is □ Why the NHS measures outcomes <p>Examples of areas used to measure outcomes for individuals may include changes to:</p> <ul style="list-style-type: none"> □ Ability to manage own health and wellbeing □ Levels of physical activity □ Ability to manage practical issues, such as debt, housing and mobility □ Levels and feelings of connection to others, isolation or loneliness

Assessment criteria

The table below gives the assessment criteria for the tasks in the set assignment for this unit. The assessment criteria indicate what is required in these tasks.

This qualification has a compensatory approach. This means that the unit grade awarded is based on the total number of achieved criteria for the unit (see [Section 6.4](#)). Students do not have to achieve all criteria for a specific grade to achieve that unit grade (e.g. achieve all Pass criteria to achieve a Pass grade).

[Section 7.4](#) provides full information on how to assess the NEA units and apply the assessment criteria. Students' work must show that all aspects of a criterion have been met in sufficient detail for it to be **successfully achieved** (see [Section 7.4.1](#)). If a student's work does not fully meet a criterion, you must not award that criterion.

The command words used in the assessment criteria are defined in [Appendix B](#).

Pass	Merit	Distinction
<p>P1: Research how social isolation affects people in the same life stage as the individual. (PO4)</p>	<p>M1: Explain how improving social connectedness might impact on the individual's mental health and wellbeing. (PO2)</p>	<p>D1: Discuss the extent to which your recommendations will help the individual to sustain social connectedness in the long-term. (PO3)</p>
<p>P2: Summarise the factors influencing the individual's levels of social connectedness. (PO2)</p>	<p>M2: Recommend and justify how the individual could improve their social connectedness. (PO3)</p>	
<p>P3: Summarise how two psychological barriers might be preventing the individual from improving their social connectedness. (PO2)</p>		
<p>P4: Describe three approaches that the individual could use to improve their social connectedness. (PO2)</p>		
<p>P5: Summarise the types of need of the individual. (PO2)</p>	<p>M3: Explain why social prescribing is appropriate for the individual to improve their mental health and wellbeing. (PO2)</p>	<p>D2: Discuss the extent to which social prescribing is likely to be successful for the individual. (PO3)</p>
<p>P6: Describe how two types of social prescribing will meet the needs of the individual. (PO2)</p>		<p>D3: Recommend and justify activities for the individual. (PO3)</p>

Pass	Merit	Distinction
<p>P7: Describe the benefits of the types of social prescribing from P6 for the individual. (PO2)</p>		
<p>P8: For each type of social prescribing in P6, research two activities in your local area that are suitable for the individual. (PO4)</p>	<p>M4: Compare the suitability of the activities from P8 for the individual. (PO3)</p>	
<p>P9: Research three organisations in your local area that would deliver the types of social prescribing from P6. (PO4)</p>	<p>M5: Assess the extent of community provision in your local area for delivery of one of the types of social prescribing from P6. (PO3)</p>	<p>D4: Analyse the factors that affect the availability of community provision suitable for social prescribing in your local area. (PO3)</p>
<p>P10: Explain how you would use a person-centred approach to care in a meeting with the individual. (PO4)</p>	<p>M6: Explain how you would support the individual to engage with the activities from P8 if you were a social prescribing link worker. (PO4)</p>	<p>D5: Discuss how you would use the skills and attributes of a social prescribing link worker in a meeting to ensure the individual engages with social prescribing. (PO3)</p>
<p>P11: Summarise how the Common Outcomes Framework for social prescribing would be used to measure outcomes for the individual. (PO2)</p>		

Assessment guidance

This assessment guidance gives you information relating to the assessment criteria. There might not be additional assessment guidance for each assessment criterion. It is included only where it is needed.

Assessment Criteria	Assessment guidance
General	<ul style="list-style-type: none"> Where criteria refer to 'the individual' this relates to the individual in the scenario. The research element of the task does not need to be completed under teacher supervised conditions, but it is necessary in order for students to access the criteria.
P1	<ul style="list-style-type: none"> Students can use research skills from Unit 3, Topic Area 3.1. Students must use three sources of information in their research. The life stage is specified in the scenario.
P2	<ul style="list-style-type: none"> P2 relates to Topic Area 1.1. Students must relate their summary to the individual in the scenario.
P3	<ul style="list-style-type: none"> P3 relates to Topic Area 1.2.
P4	<ul style="list-style-type: none"> The approaches can come from either of the areas listed in Topic Area 1.3. It is acceptable for all three approaches to come from the same area.
M1	<ul style="list-style-type: none"> There is no assessment guidance for this criterion.
M2	<ul style="list-style-type: none"> Recommendations must build on responses to P2, P3 and P4.
D1	<ul style="list-style-type: none"> The discussion must include consideration of the barriers to sustaining improvements in Topic Area 1.2.
General	<ul style="list-style-type: none"> Where criteria refer to 'the individual' this relates to the individual in the chosen scenario. Where 'local' is referred to, this can refer to the student's town or city but could be expanded to consider the county or region if relevant information can only be found at that level. The research element of the task does not need to be completed under teacher supervised conditions, but it is necessary in order for students to access the criteria.
P5	<ul style="list-style-type: none"> Students must refer to Topic Area 2.1 to help them determine the types of need in relation to their chosen individual. Students must refer to all five types of need in Topic Area 2.1. If students feel the individual does not have one or more of the types of need, they must explain their reasoning.
M3	<ul style="list-style-type: none"> M3 relates to Topic Area 2.2. Students must consider why social prescribing as an approach is suitable for the individual.
D2	<ul style="list-style-type: none"> D2 relates to Topic Area 2.6. Students must relate their discussion to the individual.
P6	<ul style="list-style-type: none"> P6 relates to Topic Area 2.3. Students must describe two different types of social prescribing to achieve this criterion.
P7	<ul style="list-style-type: none"> P7 relates to Topic Area 2.5.

	<ul style="list-style-type: none"> Students must describe the benefits of both types of social prescribing from P6 to achieve this criterion.
P8	<ul style="list-style-type: none"> Evidence of the research must include details of when and where the activities take place, how to join or access the activity and the cost.
M4	<ul style="list-style-type: none"> M4 relates to Topic Area 2.3. Students must compare cost, availability and accessibility of the activities researched in P8.
D3	<ul style="list-style-type: none"> D3 builds on P6-M4. Students could recommend one or more activities. Justifications must include consideration of needs, benefits and suitability for the individual.
P9	<ul style="list-style-type: none"> The organisations must come from Topic Area 2.4. The organisations can all come from one type in the list. The organisations could relate to one or both types of social prescribing from P6 depending on local provision.
M5	<ul style="list-style-type: none"> There is no assessment guidance for this criterion.
D4	<ul style="list-style-type: none"> D4 relates to Topic Area 2.4.
P10	<ul style="list-style-type: none"> P10 relates to Topic Area 3.1.
M6	<ul style="list-style-type: none"> M6 relates to Topic Area 3.2.1.
D5	<ul style="list-style-type: none"> D5 relates to Topic Area 3.2.3.
P11	<ul style="list-style-type: none"> P11 relates to Topic Area 3.3. Students must make reference to the areas of the NHS Common Outcomes Framework for social prescribing.

Synoptic assessment

Some of the knowledge, understanding and skills needed to complete this unit will draw on the learning in Unit/s F400 and F401.

This table details these synoptic links.

Unit F403: Community-based support for mental health and wellbeing		Unit F400: Fundamentals of mental health and the individual	
Topic Area		Topic Area	
1	Social connectedness	1	Introducing mental health and wellbeing
		2	The brain and body
		3	Factors influencing mental health and wellbeing
		6	Strategies for managing mental health and wellbeing
2	Social prescribing and community-based support	5	Mental health issues and disorders
		6	Strategies for managing mental health and wellbeing
3	Supporting individual needs through social prescribing and community-based support	5	Mental health issues and disorders
		6	Strategies for managing mental health and wellbeing

Unit F403: Community-based support for mental health and wellbeing		Unit F401: Mental health, wellbeing and society	
Topic Area		Topic Area	
1	Social connectedness	1	Evolving perceptions of mental health in society
		3	Society today
2	Social prescribing and community-based support	2	Societal developments and mental health
3	Supporting individual needs through social prescribing and community-based support	3	Society today

More information about synoptic assessment in these qualifications can be found in [Section 6.2 Synoptic assessment](#).

5.3.3 Unit F404: Supporting mental health and wellbeing with physical activity

Unit Aim

Physical activity is beneficial for mental health as well as physical health. Keeping active can increase our energy levels and boost our mood as well as reducing disease risk and increasing life expectancy.

In this unit, you will learn about physical activity and its physiological and mental effects. You will discover how to plan and record a physical activity program and measure its impact on mental health and wellbeing. You will also learn about the necessary actions for compliance with relevant legislation and how to address potential barriers to participation for those with mental health issues.

F404: Supporting mental health and wellbeing with physical activity	
Topic Area 1: Impact of physical activity on mental health and wellbeing	
Teaching content	Exemplification
1.1 Physical activity	
<ul style="list-style-type: none"> □ Physical activity: <ul style="list-style-type: none"> • Categories: <ul style="list-style-type: none"> ○ Sport ○ Non-sport • Features: <ul style="list-style-type: none"> ○ Duration ○ Frequency ○ Level of complexity ○ Level of intensity ○ Level of social interaction ○ Level of technical skill required ○ Setting ○ Structured/unstructured • Recommended levels: <ul style="list-style-type: none"> ○ Adults (19-64) ○ Older adults ○ Children and young people ○ Children under five 	<p>To include:</p> <ul style="list-style-type: none"> □ That physical activity is any bodily movement produced by skeletal muscles requiring energy expenditure □ The features of physical activities □ That recommended levels of physical activity are different for people of different ages □ How the different features of physical activity can impact on mental health and wellbeing □ That the different features can affect the mental health and wellbeing of participants differently <p>Examples of level of intensity may include:</p> <ul style="list-style-type: none"> □ Low □ Moderate □ Vigorous □ Very vigorous <p>Examples of setting may include:</p> <ul style="list-style-type: none"> □ Public spaces □ Local authority managed indoor spaces □ Local authority managed outdoor spaces □ Privately managed indoor spaces □ Privately managed outdoor spaces <p>Examples of non-sport may include:</p> <ul style="list-style-type: none"> □ Household chores □ Occupational activity

1.2 Physiological effects of physical activity	
<ul style="list-style-type: none"> □ Body systems: <ul style="list-style-type: none"> • Cardiovascular system • Control and regulatory system • Musculoskeletal system • Respiratory system □ Physical health benefits 	<p>To include:</p> <ul style="list-style-type: none"> □ The main short- and long-term effects of physical activity on the different body systems □ How inactivity can affect the different body systems □ The main physical health benefits of physical activity <p>Does not include:</p> <ul style="list-style-type: none"> □ Detailed study of the different body systems
1.3 The links between physical activity and mental health and wellbeing	
<ul style="list-style-type: none"> □ The effect of physical activity on mental health indicators: <ul style="list-style-type: none"> • Anxiety levels • Levels of social interaction • Mood • Motivation and focus • Rates of depression • Self-esteem • Sleep quality □ The effect of physical activity on mental health disorders 	<p>To include:</p> <ul style="list-style-type: none"> □ How physical activity can affect each indicator of mental health □ How physical activity supports physical health, in turn supporting mental health and wellbeing □ How physical activity can be used to support the management of mental health disorders

Topic Area 2: Planning physical activities for mental health and wellbeing	
Teaching content	Exemplification
2.1 Participant considerations	
<ul style="list-style-type: none"> □ Physical: <ul style="list-style-type: none"> • Access to facilities • Age • Disability • Fitness level • Physical health □ Personal: <ul style="list-style-type: none"> • Cultural factors • Money • Personal commitments • Time □ Technical: <ul style="list-style-type: none"> • Ability • Understanding 	<p>To include:</p> <ul style="list-style-type: none"> □ How the different considerations can influence the choice of physical activity for an individual □ How the different considerations can influence levels of participation in physical activity □ How the different considerations can influence a physical activity programme
2.2 Measuring levels of mental health and wellbeing	
<ul style="list-style-type: none"> □ The difficulty of measuring levels of mental health and wellbeing □ Measurement tools for levels of mental health and wellbeing: <ul style="list-style-type: none"> • Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS) □ Monitoring changes in mental health and wellbeing: <ul style="list-style-type: none"> • Mental health and wellbeing diary • Mood diary/journal 	<p>To include:</p> <ul style="list-style-type: none"> □ Why measuring levels of mental health and wellbeing can be difficult □ How the WEMWBS can be used to monitor changes in mental health and wellbeing □ How diaries and journals can be used to monitor changes in mental health and wellbeing over time

<ul style="list-style-type: none"> □ The challenges of assessing the impact of physical activity on mental health and wellbeing: <ul style="list-style-type: none"> • Subjectivity of mental health and wellbeing measurements • The challenge of linking changes to mental health and wellbeing to a single activity • The significance of other factors in determining levels of mental health and wellbeing 	<ul style="list-style-type: none"> □ How the different challenges affect the reliability of mental health and wellbeing measurements
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------

2.3 Planning and recording the activity	
<ul style="list-style-type: none"> □ Planning documentation: <ul style="list-style-type: none"> • Individual activity plan: <ul style="list-style-type: none"> ○ Duration ○ Frequency ○ Level of intensity ○ Level of social interaction ○ Setting ○ Structured/unstructured • Physical activity record: <ul style="list-style-type: none"> ○ Variables recorded 	<p>To Include:</p> <ul style="list-style-type: none"> □ What an individual physical activity plan is □ How to complete a physical activity plan for a physical activity programme □ That planning can be adapted in response to changes in participant needs □ The different variables that can be recorded in a physical activity record

Topic Area 3: Supporting physical activity participation and engagement	
Teaching content	Exemplification
3.1 Physical activity providers	
<ul style="list-style-type: none"> □ Community and leisure centres □ Dance groups and schools □ Gyms and fitness centres □ Outdoor activity providers □ Registered exercise professionals □ Specialised programmes □ Sports clubs 	<p>To include:</p> <ul style="list-style-type: none"> □ How the different providers contribute to participation in physical activity □ How the different providers can support engagement in physical activity <p>Examples of registered exercise professionals may include:</p> <ul style="list-style-type: none"> □ Personal trainers □ Fitness instructors □ Exercise referral specialists □ Yoga teachers □ Pilates instructors <p>Examples of outdoor activity providers may include:</p> <ul style="list-style-type: none"> □ Hiking clubs or groups □ Cycling clubs or groups □ Rock climbing clubs or groups □ Water sports clubs or groups <p>Examples of specialised programmes may include:</p> <ul style="list-style-type: none"> □ Specialised provision for people with disabilities □ Specialised provision for pregnant women □ Specialised provision for older adults

3.2 Mental health related considerations	
<ul style="list-style-type: none"> □ Factors affecting participation and engagement in physical activity: <ul style="list-style-type: none"> • Anxiety levels • Confidence levels • Fatigue • Motivation • Side effects of medication 	<p>To include:</p> <ul style="list-style-type: none"> □ How the different factors can affect participation in and engagement with physical activities □ How an individual can be supported with each factor to increase participation in and engagement with physical activity
3.3 Inclusivity and engagement	
<ul style="list-style-type: none"> □ Ensuring inclusivity through the STEP model: <ul style="list-style-type: none"> • Space • Task • Equipment • Person □ Ensuring sustained engagement through the EAST model: <ul style="list-style-type: none"> • Easy to attend • Attractive to participants • Social • Timely 	<p>To include:</p> <ul style="list-style-type: none"> □ What inclusivity is and why it's important for physical activities □ What the STEP model is □ How the STEP model can be used to assess the inclusivity of a physical activity □ How the STEP model can be used to consider ways to adapt physical activities to improve inclusivity □ What the EAST model is □ How the EAST model can be used to ensure physical activities are engaging for participants □ The value of inclusivity and engagement in maximising the mental health benefits of physical activity □ How improving inclusivity and engagement can support the different mental health considerations from Topic Area 3.2
3.4 Complying with legislation for physical activity	
<ul style="list-style-type: none"> □ Avoiding discrimination in physical activities: <ul style="list-style-type: none"> • Direct discrimination • Indirect discrimination □ Making reasonable adjustments for physical activity participants 	<p>To include:</p> <ul style="list-style-type: none"> □ That mental health is a legally protected characteristic □ The different types of discrimination □ How the different types of discrimination might occur when planning and running a physical activity □ How to avoid discriminating against participants in a physical activity session or programme □ What a reasonable adjustment is □ How reasonable adjustments can be made for participants when planning and running a physical activity

3.5 Potential problems of participation	
<ul style="list-style-type: none"> □ Exercise addiction □ Over-exercising □ Relative Energy Deficiency in Sport (RED-S) 	<p>To include:</p> <ul style="list-style-type: none"> □ What each problem is □ How to recognise the signs of each problem in an individual □ How the problems can affect an individual □ How activity leaders can support individuals to manage the potential problems of participation in physical activity □ The challenges activity leaders might face supporting individuals with each problem to participate in physical activity sessions □ The extent to which an activity leader can support an individual to manage each problem and participate in physical activity sessions

Assessment criteria

The table below gives the assessment criteria for the tasks in the set assignment for this unit. The assessment criteria indicate what is required in these tasks.

This qualification has a compensatory approach. This means that the unit grade awarded is based on the total number of achieved criteria for the unit (see [Section 6.4](#)). Students do not have to achieve all criteria for a specific grade to achieve that unit grade (e.g. achieve all Pass criteria to achieve a Pass grade).

[Section 7.4](#) provides full information on how to assess the NEA units and apply the assessment criteria. Students' work must show that all aspects of a criterion have been met in sufficient detail for it to be **successfully achieved** (see [Section 7.4.1](#)). If a student's work does not fully meet a criterion, you must not award that criterion.

The command words used in the assessment criteria are defined in [Appendix B](#).

Pass	Merit	Distinction
<p>P1: Outline a four-week physical activity programme that is appropriate for you. (PO4)</p>	<p>M1: Explain the possible effects of your physical activity programme on your mental health and wellbeing. (PO2)</p>	<p>D1: Discuss the challenges of assessing the impact of your physical activity programme on your mental health and wellbeing. (PO3)</p>
<p>P2: Explain how participant considerations have influenced your physical activity programme. (PO2)</p>		
<p>P3 Create a physical activity record to use for your chosen activity over the four-week period. (PO4)</p>	<p>M2: Assess the impact of the physical activity programme on your overall wellbeing. (PO3)</p>	

Pass	Merit	Distinction
P4 Complete the planned physical activity for four weeks and keep a record of your activities. (PO4)		
P5: Research three activity sessions in your local area that would be appropriate for the individual. (PO4)	M3: Compare the three activity sessions from P5 using the EAST model. (PO4)	D2: Recommend and justify which activity session is most appropriate for the individual. (PO3)
P6: Describe the main physical health benefits of one physical activity from P5 . (PO2)		D3: Discuss how effective the physical activity will be in improving the physical and mental health of the individual. (PO3)
P7: Describe the overall mental health benefits of the physical activity from P6 . (PO2)		
P8: Find one piece of reliable research into the link between physical activity and the mental health disorder identified in the case study. (PO4)	M4: Explain what the research shows about the link between physical activity and the mental health disorder identified in the case study. (PO4)	
P9: Explain how the mental health disorder might affect the individual's participation in physical activity. (PO2)		
P10: Complete the STEP model to identify possible adaptations for your chosen activity session. (PO4)	M5: Recommend how the leader can adapt the activity session for the individual based on the STEP model and reasonable adjustments. (PO3)	D4: Discuss how the recommendations from M5 will support the individual in taking part and remaining engaged in the activity session. (PO3)
P11: Describe the potential problems of physical activity for the individual in the case study. (PO2)	M6: Explain how the activity session leader could support the individual to reduce the potential problems identified in P11 . (PO2)	D5: Discuss the challenges the activity session leader might face in supporting the individual. (PO3)

Assessment guidance

This assessment guidance gives you information relating to the assessment criteria. There might not be additional assessment guidance for each assessment criterion. It is included only where it is needed.

Assessment Criteria	Assessment guidance
General	<ul style="list-style-type: none"> • It is recommended that students keep a mental health and wellbeing diary throughout the four-week period. It is also recommended that students measure their mental health and wellbeing each week for the duration of the programme. This will support students to complete M2 and D1. • Diaries and completed Warwick-Edinburgh Mental Wellbeing Scale measurements must not be submitted as evidence. • It is not intended that students use the Warwick-Edinburgh Mental Wellbeing Scale as a tool for self-diagnosis. The individual questions in the template are intended to be used as a stimulus for students to consider aspects of their mental health and wellbeing for the duration of the assessment. • Where assessment criteria and guidance refer to an 'activity' this can be one or more activities. • The physical activity does not need to be completed under teacher supervision.
P1	<ul style="list-style-type: none"> • For P1 Students should measure their current physical activity levels as a baseline and make a programme of activity that is appropriate to them. • To achieve this criterion, students must provide a brief outline as a plan of the activity being carried out, in relation to: <ul style="list-style-type: none"> ○ Duration ○ Frequency ○ Level of intensity ○ Level of social interaction ○ Setting ○ Structured/unstructured • Students can complete more than one type of physical activity. Details of all physical activities must be included in the plan. • There is no minimum requirement for the activity, but students must consider all of the assessment criteria when selecting their activity and activity duration to ensure the full range of criteria can be accessed. The potential mental health and wellbeing benefits of the activity should be considered for the same reason.
P2	<ul style="list-style-type: none"> • P2 relates to participant considerations in Topic Area 2.1. • Students must explain how they have taken physical, technical and personal considerations into account when choosing their activity. Explanations must include at least one of each type of consideration.
M1	<ul style="list-style-type: none"> • M1 relates to Topic Areas 1.1 and 1.3. • Students must relate their explanation to at least two appropriate features of physical activity from Topic Area 1.1.

P3	<ul style="list-style-type: none"> • P3 relates to Topic Area 2.3. • Students must create a physical activity record. This could be a simple log sheet or table. This activity record must be provided as evidence. • Students must give details of the variables they will record, and briefly outline why these variables are appropriate.
P4	<ul style="list-style-type: none"> • The physical activity does not need to be completed under teacher supervision. • Completed physical activity records must be provided as evidence for this criterion. • It is expected that students will complete the four-week physical activity programme, but if necessary, it is acceptable for students to modify their programme during the four weeks but their activity records should reflect this.
M2	<ul style="list-style-type: none"> • Students should consider their mental health and wellbeing measurements from before, during and after the four-week programme. • Students can draw on content from Unit F400, Topic Area 1.1.3: Wellbeing for this criterion. Students must relate their assessment to their own experiences. • Students must include consideration of physical, mental, emotional and social wellbeing to achieve this criterion. If students do not consider there has been an impact on any or all of these elements, they must provide reasons why.
D1	<ul style="list-style-type: none"> • D1 relates to Topic Area 2.2. • Students can draw on content from Unit F400, Topic Area 3: Factors influencing mental health and wellbeing for this criterion. Students must relate their discussion to their own experiences.
General	<ul style="list-style-type: none"> • Where criteria refer to physical activity, this means the physical activity that happens in a physical activity session, e.g. football. • The research element of the task does not need to be completed under teacher supervised conditions, but it is necessary in order for students to access the criteria.
P5	<ul style="list-style-type: none"> • P5 relates to Topic Area 3.1. • The research must include details of: <ul style="list-style-type: none"> ○ who the activity provider is ○ when and where the activity sessions take place ○ how to join or access the activity sessions. • Students must select the type of activity session specified in the case study. • All three physical activity sessions researched must be of the type specified in the case study. The physical activity can be (but does not need to be) the same in all three sessions. • Students should take into consideration that one of the activities for P5 will form the basis of P6, P7, D3 and Task 2b. • Students do not need to comment on the appropriateness of the activity sessions to achieve this criterion. However, students should

	be encouraged to research activity sessions that are appropriate for the individual as this will be covered in D2 .
M3	<ul style="list-style-type: none"> • M3 relates to Topic Area 3.3.
D2	<ul style="list-style-type: none"> • D2 must build on P5 and M3. • Recommendations and justifications must relate to the individual in the case study and include relevant participant considerations from Topic Area 2.1.
P6	<ul style="list-style-type: none"> • P6 relates to Topic Area 1.2. • Students must describe the benefits of one of the physical activities researched in P5.
P7	<ul style="list-style-type: none"> • P7 relates to Topic Area 1.3. • Students must relate their response to the physical activity from P6.
P8	<ul style="list-style-type: none"> • Students can use research skills from Unit F402, Topic Area 3.1. The research must relate to the mental health disorder identified in the case study. • Students must include a brief outline of the findings of the research. • Students must include why they consider the source of research to be reliable.
M4	<ul style="list-style-type: none"> • M4 relates to P8.
D3	<ul style="list-style-type: none"> • D3 builds on P6–P8 and M4 and must relate to the physical activity from P6.
General	<ul style="list-style-type: none"> • Students must choose one of the activity sessions from P5 as the basis for Task 2b. Where students have attempted D2, it is suggested that they should use the activity session they have recommended.
P9	<ul style="list-style-type: none"> • P9 relates to Topic Area 3.2. • Responses must relate to the individual and the mental health disorder identified in the case study. • Students can draw on content from Unit F400, Topic Area 5 for this criterion.
P10	<ul style="list-style-type: none"> • P10 relates to Topic Area 3.3. • Students must cover all four areas of the model.
M5	<ul style="list-style-type: none"> • M5 relates to Topic Areas 3.3 and 3.4 and builds on P10. • Students must cover all four areas of the STEP model and reasonable adjustments. If students feel that no adaptations are necessary in an area, they must explain why. • Recommended adaptations and reasonable adjustments must be appropriate for the individual in the case study.
D4	<ul style="list-style-type: none"> • There is no assessment guidance for this criterion.
P11	<ul style="list-style-type: none"> • P11 relates to Topic Area 3.5. • Students must relate their response to the individual in the case study.
M6	<ul style="list-style-type: none"> • M6 builds on P11.
D5	<ul style="list-style-type: none"> • D5 builds on M6.

Synoptic assessment

Some of the knowledge, understanding and skills needed to complete this unit will draw on the learning in Unit/s F400 and F401.

This table details these synoptic links.

Unit F404: Supporting mental health and wellbeing with physical activity		Unit F400: Fundamentals of mental health and the individual	
Topic Area		Topic Area	
1	Impact of physical activity on mental health and wellbeing	1 3	Introducing mental health and wellbeing Factors influencing mental health and wellbeing
2	Planning physical activities for mental health and wellbeing	1 6	Introducing mental health and wellbeing Strategies for managing mental health and wellbeing
3	Supporting physical activity participation and engagement	5 6	Mental health issues and disorders Strategies for managing mental health and wellbeing

Unit F404: Supporting mental health and wellbeing with physical activity		Unit F401: Mental health, wellbeing and society	
Topic Area		Topic Area	
1	Impact of physical activity on mental health and wellbeing	3	Society today
2	Planning physical activities for mental health and wellbeing	3	Society today
3	Supporting physical activity participation and engagement	3	Society today

More information about synoptic assessment in these qualifications can be found in [Section 6.2 Synoptic assessment](#).

5.3.4 Unit F405: Supporting mental health and wellbeing with outdoor and creative activities

Unit Aim

Our interactions with nature and outdoor spaces, along with opportunities for creative expression through activities like art, dance, drama, music, and play, can significantly boost mental health and wellbeing. These activities provide valuable tools for mental health promotion and therapy by allowing individuals to express their thoughts and emotions beyond words.

In this unit you will learn about nature connectedness, reflect on your experiences with nature, and learn how outdoor and creative activities are used therapeutically. You'll explore the approaches behind these therapies, their effectiveness, and the techniques used to benefit mental health and wellbeing.

Unit F405: Supporting mental health and wellbeing with outdoor and creative activities	
Topic Area 1: Nature, the outdoors and mental health and wellbeing	
Teaching content	Exemplification
1.1 Nature and nature connectedness	
<ul style="list-style-type: none"> <input type="checkbox"/> What nature is <input type="checkbox"/> Interacting with nature: <ul style="list-style-type: none"> • Indoors • Outdoors <input type="checkbox"/> Nature connectedness: <ul style="list-style-type: none"> • What nature connectedness is • Impact on mental health and wellbeing 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> How nature can be defined <input type="checkbox"/> That nature can be defined by our own personal experience, perceptions of, and interactions with stimuli from the natural world <input type="checkbox"/> The different ways to interact with nature indoors and outdoors <input type="checkbox"/> How nature connectedness can affect the brain and body and in turn affect our mental health and the elements of wellbeing <p>Examples of interacting with nature indoors may include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Growing herbs indoors <input type="checkbox"/> Listening to birdsong through a window <input type="checkbox"/> Looking at nature photography <input type="checkbox"/> Observing the movement of the sun <p>Examples of interacting with nature outdoors may include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Camping <input type="checkbox"/> Cycling <input type="checkbox"/> Gardening <input type="checkbox"/> Hiking <input type="checkbox"/> Walking <input type="checkbox"/> Wildlife observation
1.2 Outdoor spaces	
<ul style="list-style-type: none"> <input type="checkbox"/> Types: <ul style="list-style-type: none"> • Public green space • Private green space • Public blue space • Private blue space <input type="checkbox"/> Features: <ul style="list-style-type: none"> • Location • Entry cost 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> The different types of outdoor that can be accessed in local areas <input type="checkbox"/> How the different types of outdoor space can be used to benefit mental health and wellbeing <input type="checkbox"/> How the different features of outdoor spaces can affect access

<ul style="list-style-type: none"> • Size • Facilities • Opening times □ Organisations involved in the management of outdoor space □ Improving outdoor spaces: <ul style="list-style-type: none"> • Maintenance • Upkeep • Development • Creative use of space 	<ul style="list-style-type: none"> □ How organisations can work to improve outdoor spaces □ How local authority initiatives can assist in improving access to nature <p>Examples of public green space may include:</p> <ul style="list-style-type: none"> □ Hills □ Mountains □ Parkland □ Sports fields □ Public footpaths <p>Examples of private green space may include:</p> <ul style="list-style-type: none"> □ Gardens □ Private land □ Farmland <p>Examples of public blue space may include:</p> <ul style="list-style-type: none"> □ Lakes □ Oceans □ Ponds □ Reservoirs □ Rivers <p>Examples of private blue space may include:</p> <ul style="list-style-type: none"> □ Fishpond □ Swimming pool <p>Examples of organisations involved in the management of outdoor space may include:</p> <ul style="list-style-type: none"> □ Local authorities □ National Parks UK □ Charities <p>Privately owned organisations</p>
<p>1.3 Factors that affect accessing nature and the outdoors</p>	
<ul style="list-style-type: none"> □ Availability of spaces □ Cost to the user/available income □ Geographical location □ Motivation of the user □ Personal circumstances □ Time available to the user □ Access restrictions 	<p>To include:</p> <ul style="list-style-type: none"> □ How the different factors can affect ease of access to interacting with nature □ How the different factors can be influenced by the individual □ How local authorities can assist in reducing the negative impact of factors affecting access to nature

Topic Area 2: Outdoor activities for therapeutic purposes	
Teaching content	Exemplification
2.1 Using outdoor activities to improve mental health and wellbeing	
<ul style="list-style-type: none"> □ Outdoor therapy: <ul style="list-style-type: none"> • Definitions • Types • Purposes • Features • Links to counselling and psychotherapy □ How outdoor therapy addresses needs: <ul style="list-style-type: none"> • Physical • Intellectual • Emotional • Social □ Practitioners that use outdoor therapy: <ul style="list-style-type: none"> • Counsellors • Mental health practitioners • Psychologists • Psychotherapists 	<p>To include:</p> <ul style="list-style-type: none"> □ That different organisations define outdoor therapies differently □ The main features of the different types of outdoor therapy □ The purpose of engaging in outdoor activities for therapeutic purposes □ How outdoor activities are used within the context of counselling and psychotherapy □ How outdoor therapies are used to complement other treatments <p>Examples of types of outdoor therapy may include:</p> <ul style="list-style-type: none"> □ Adventure therapy □ Animal-assisted therapy □ Care farming □ Environmental conservation □ Green exercise therapy □ Nature arts and crafts □ Social and therapeutic horticulture □ Wilderness therapy <p>Does not include:</p> <ul style="list-style-type: none"> □ Detailed understanding of how psychologists may use outdoor therapy in the course of their work
2.2 Theoretical frameworks underpinning outdoor therapies	
<ul style="list-style-type: none"> □ Theoretical frameworks <ul style="list-style-type: none"> • Attention restoration theory • Ecopsychology • Gilbert's model of affect regulation • Stress reduction theory 	<p>To include:</p> <ul style="list-style-type: none"> □ The key principles of each framework □ How each framework could be used to explain nature's role in outdoor therapy <p>Does not include:</p> <ul style="list-style-type: none"> □ Detailed understanding of the criticisms of the frameworks
2.3 What happens in outdoor therapy	
<ul style="list-style-type: none"> □ Categories of activities: <ul style="list-style-type: none"> • Adventure-based • Animal-based • Nature-based □ Settings □ Practitioner roles 	<p>To include:</p> <ul style="list-style-type: none"> □ The different types of activities for each category □ The different types of activities that happen in outdoor therapy programmes/sessions □ The benefits of the different types of activity □ Where the different types of outdoor therapy can take place □ The different tools and techniques that can be used in outdoor activity sessions □ That different practitioners may use tools and techniques from different outdoor activities within the same session <p>Examples of practitioner roles may include:</p> <ul style="list-style-type: none"> □ Demonstrating techniques

	<ul style="list-style-type: none"> <input type="checkbox"/> Encouraging engagement <input type="checkbox"/> Encouraging self-reflection <input type="checkbox"/> Ensuring health and safety of participants <input type="checkbox"/> Supporting participants
--	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Topic Area 3: Creative therapies in practice	
Teaching content	Exemplification
3.1 The value of creative activities	
<ul style="list-style-type: none"> <input type="checkbox"/> Creative activity: <ul style="list-style-type: none"> • Value • Types • Links to improvements in mental health and wellbeing <input type="checkbox"/> Practitioners that use creative activities: <ul style="list-style-type: none"> • Counsellors • Creative therapists • Mental health practitioners • Psychologists • Psychotherapists 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> The value of creative activities for supporting mental health and wellbeing <p>Examples of types of creative activity may include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Art <input type="checkbox"/> Dance <input type="checkbox"/> Drama <input type="checkbox"/> Music <input type="checkbox"/> Play
3.2 Theories and approaches underpinning creative therapy practice	
<ul style="list-style-type: none"> <input type="checkbox"/> Psychological theories and approaches <ul style="list-style-type: none"> • Attachment theory • Carl Jung's analytical psychology • Cognitive-Behavioural Therapy (CBT) • Developmental theory • Humanistic and person-centred approaches • Mindfulness-based approaches • Psychoanalytic theory 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Awareness that practitioners may integrate elements from multiple theories or theories depending on the individual/s they are working with <input type="checkbox"/> The key principles of each theory or approach <input type="checkbox"/> How each theory or approach could be used to inform creative therapy practice <p>Does not include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Detailed understanding of the criticisms of the theories or approaches
3.3 Creative therapies	
<ul style="list-style-type: none"> <input type="checkbox"/> Types: <ul style="list-style-type: none"> • Art • Dance • Drama • Music • Play <input type="checkbox"/> What happens in creative therapy sessions: <ul style="list-style-type: none"> • Creative activity techniques • Therapeutic techniques <input type="checkbox"/> Qualifications required <input type="checkbox"/> Regulation <input type="checkbox"/> Professional bodies 	<p>To include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> What each type of creative therapy is <input type="checkbox"/> The benefits and limitations of each type of creative therapy <input type="checkbox"/> What each type of creative therapist does during a therapy session <input type="checkbox"/> The different techniques that can be used in creative therapy sessions <input type="checkbox"/> How the different techniques can be used to support an individual <input type="checkbox"/> That different practitioners may use techniques from different creative therapies within the same session <input type="checkbox"/> The qualifications required to become each type of creative therapist <input type="checkbox"/> How each creative therapy is regulated <input type="checkbox"/> What the professional bodies associated with each creative therapy do <p>The benefit of professional membership for each type of creative therapy</p>

	<p>Examples of creative activity techniques may include:</p> <ul style="list-style-type: none"> □ Art (drawing, painting, clay modelling) □ Dance (improvisational dance, mirroring, body awareness exercises) □ Drama (role playing, improvisation, storytelling) □ Music (singing, playing instruments, songwriting) □ Play (sand tray therapy, building and construction, sensory play) <p>Examples of therapeutic techniques may include:</p> <ul style="list-style-type: none"> □ initial assessment □ goal setting □ warm-up activities
<p>3.4 Measuring the effectiveness of creative therapies</p>	
<ul style="list-style-type: none"> □ Measures of effectiveness: <ul style="list-style-type: none"> • Measures: <ul style="list-style-type: none"> ○ Qualitative ○ Quantitative • Benefits and limitations • Uses □ Challenges of measuring the effectiveness of creative therapies 	<p>To include:</p> <ul style="list-style-type: none"> □ The benefits and limitations of the different measures □ How the different measures can be used to make judgements about the effectiveness of creative therapies □ Why measuring the effectiveness of creative therapies can be problematic □ That therapists may use a combination of measures to determine effectiveness <p>Examples of qualitative measures of effectiveness may include:</p> <ul style="list-style-type: none"> □ Individual and family feedback □ Interpretation of creative work □ Levels of engagement □ Observation □ Reviewing progress against therapeutic goals <p>Examples of quantitative measures of effectiveness may include:</p> <ul style="list-style-type: none"> □ Physiological measurements □ Wellbeing measurements

Assessment criteria

The table below gives the assessment criteria for the tasks in the set assignment for this unit. The assessment criteria indicate what is required in these tasks.

This qualification has a compensatory approach. This means that the unit grade awarded is based on the **total** number of achieved criteria for the unit (see [Section 6.4](#)). Students do **not** have to achieve **all** criteria for a specific grade to achieve that unit grade (e.g. achieve all Pass criteria to achieve a Pass grade).

[Section 7.4](#) provides full information on how to assess the NEA units and apply the assessment criteria. Students' work must show that all aspects of a criterion have been met in sufficient detail for it to be **successfully achieved** (see [Section 7.4.1](#)). If a student's work does not fully meet a criterion, you must not award that criterion.

The command words used in the assessment criteria are defined in [Appendix B](#).

Pass	Merit	Distinction
<p>P1: Describe three ways you have interacted with nature during the one-week period. (PO4)</p>	<p>M1: Explain how your interactions with nature have affected each element of your wellbeing. (PO2)</p>	<p>D1: Discuss how you could improve your wellbeing through interactions with nature. (PO3)</p>
<p>P2: Outline the factors affecting how you access nature. (PO4)</p>		
<p>P3: Find one piece of reliable research into the link between interacting with nature and mental health and wellbeing. (PO4)</p>	<p>M2: Explain what the research shows about the link between interacting with nature and mental health and wellbeing. (PO3)</p>	<p>D2: Discuss how the initiative from M3 will affect wellbeing in your community. (PO3)</p>
<p>P4: Research one public green space and one public blue space in your local area. (PO4)</p>		
<p>P5: Outline the main features of the outdoor therapy. (PO2)</p>	<p>M4: Explain how one theoretical framework underpins nature's role in the outdoor therapy. (PO3)</p>	<p>D3: Discuss the extent to which the outdoor therapy is likely to benefit the individual. (PO3)</p>
<p>P6: Explain how the outdoor therapy will address the individual's needs. (PO2)</p>		
<p>P7: Describe three activities that are used as part of the outdoor therapy. (PO2)</p>		

Pass	Merit	Distinction
P8: Research a suitable provider for the outdoor therapy. (PO4)		
P9: Describe three ways the creative activity can improve mental health and wellbeing. (PO2)	M5: Explain one psychological theory or approach underpinning the creative therapy. (PO3)	D4: Discuss how the therapist could measure the effectiveness of the creative therapy for the individual. (PO3)
P10: Describe three creative activity techniques that the creative therapist could use during a session with the individual. (PO2)		
P11: Research how the creative therapy is regulated and supported by professional bodies. (PO4)	M6: Explain how the creative therapist would work with the individual during a therapy session. (PO3)	D5: Discuss the benefits to the individual of the creative therapy being regulated and supported by professional bodies. (PO3)

DRAFT

Assessment guidance

This assessment guidance gives you information relating to the assessment criteria. There might not be additional assessment guidance for each assessment criterion. It is included only where it is needed.

Assessment Criteria	Assessment guidance
General	<ul style="list-style-type: none"> Where 'local' is referred to, this can refer to the student's town or city but could be expanded to consider the county or region if relevant information can only be found at that level. The research elements of the task does not need to be completed under teacher supervised conditions, but it is necessary in order for students to access the criteria.
P1	<ul style="list-style-type: none"> Students must include how they interacted with nature, whether the activities were indoors or outdoors, and the type and duration of activities. It is recommended that students reflect on the benefits of their interactions with nature as part of their journal. Journals can be in any format that the student chooses. Journals will not be assessed and do not need to be submitted to OCR for moderation.
P2	<ul style="list-style-type: none"> The focus of P2 is how students access nature in general on a regular basis and does not necessarily relate to P1. P2 relates to Topic Area 1.3. Students must consider all factors listed in the topic area.
M1	<ul style="list-style-type: none"> Students can use Unit 1, Topic Area 1.1.3 to support completion of M1. Students must include consideration of physical, mental, emotional and social wellbeing. If students consider there has been no impact on one or more of the elements, they must explain way.
D1	<ul style="list-style-type: none"> D1 must relate to M1. Students can use F400, Topic Area 1.1.3 to support completion of D1. If students do not consider that their wellbeing or access to nature could be improved, they must discuss why.
P3	<ul style="list-style-type: none"> Students can use research skills from Unit F402, Topic Area 3.1. Students must include a brief outline of the purpose of the research. <u>Students must include why they consider the source of research to be reliable.</u>
M2	<ul style="list-style-type: none"> M2 links to P3.
P4	<ul style="list-style-type: none"> P4 relates to Topic Area 1.2. Research must include specific details of the green and blue spaces including location, entry cost, size, facilities, opening times and the organisation that manages each of them.

M3	<ul style="list-style-type: none"> Students should choose an initiative that allows them to access D2. The initiative must be planned, in progress or have been completed in the last twelve months. Explanations must include what the initiative is, its planned or actual completion date, details of the initiative and how it will improve the space.
D2	<ul style="list-style-type: none"> Students can use F400, Topic Area 1.1.3 to support completion of D2.
General	<ul style="list-style-type: none"> Where criteria refer to 'the individual' this relates to the individual in the case study. Where criteria refer to 'the outdoor therapy' this relates to the outdoor therapy the candidate has chosen from the scenario. The research element of the task does not need to be completed under teacher supervised conditions, but it is necessary in order for students to access the criteria.
P5	<ul style="list-style-type: none"> P5 relates to Topic Area 2.1.
P6	<ul style="list-style-type: none"> P6 relates to Topic Area 2.1. Students must include consideration of at least two needs which must come from two different types of need (physical, intellectual, emotional or social).
P7	<ul style="list-style-type: none"> P7 relates to Topic 2.3. Students must select three activities and describe how they are used as part of the outdoor therapy.
P8	<ul style="list-style-type: none"> The research must include details of who the provider is, what activities take place, when and where the activities take place, and how to join or access the activity. By 'provider' we mean an organisation that provides outdoor therapy.
M4	<ul style="list-style-type: none"> M4 relates to Topic Area 2.2.
D3	<ul style="list-style-type: none"> Students must relate their discussion to the individual.
General	<ul style="list-style-type: none"> Where criteria refer to 'the creative therapy' this is the creative therapy specified in the scenario. The research element of the task does not need to be completed under teacher supervised conditions, but it is necessary in order for students to access the criteria.
P9	<ul style="list-style-type: none"> P9 relates to Topic Area 3.1. This criterion relates to the creative activity specified in the scenario and not the creative therapy.
P10	<ul style="list-style-type: none"> P10 relates to Topic Areas 3.3 and must relate to the creative therapy in the scenario. The techniques must be appropriate for the individual in the scenario.
P11	<ul style="list-style-type: none"> P11 relates to Topic Area 3.3. Students must summarise the relevant professional bodies, their role and how they support the creative therapist, as well as how the therapy is regulated.
M5	<ul style="list-style-type: none"> M5 relates to Topic Area 3.2. The psychological theory or approach does not need to come from the unit content but must be relevant to the specified therapy.

D4	<ul style="list-style-type: none"> • D4 relates to Topic Area 3.4. • The measures must be relevant to the individual in the scenario.
M6	<ul style="list-style-type: none"> • M6 relates to Topic Areas 3.3. • Students must relate their responses to the individual in the scenario.
D5	<ul style="list-style-type: none"> • D5 relates to Topic Area 3.3. • Students must relate their responses to the individual in the scenario.

Synoptic assessment

Some of the knowledge, understanding and skills needed to complete this unit will draw on the learning in Unit/s F400 and F401.

This table details these synoptic links.

Unit F405: Supporting mental health and wellbeing with outdoor and creative activities		Unit F400: Fundamentals of mental health and the individual	
Topic Area		Topic Area	
1	Nature, the outdoors and mental health and wellbeing	1 2 5 6	Introducing mental health and wellbeing The brain and body Mental health issues and disorders Strategies for managing mental health and wellbeing
2	Outdoor activities for therapeutic purposes	1 2 5 6	Introducing mental health and wellbeing The brain and body Mental health issues and disorders Strategies for managing mental health and wellbeing
3	Creative therapies in practice	1 2 5 6	Introducing mental health and wellbeing The brain and body Mental health issues and disorders Strategies for managing mental health and wellbeing

Unit F405: Supporting mental health and wellbeing with outdoor and creative activities		Unit F401: Mental health, wellbeing and society	
Topic Area		Topic Area	
1	Nature, the outdoors and mental health and wellbeing	1 3 4	Evolving perceptions of mental health in society Society today Current influences on the mental health and wellbeing of society
2	Outdoor activities for therapeutic purposes	1 3 4	Evolving perceptions of mental health in society Society today Current influences on the mental health and wellbeing of society
3	Creative therapies in practice	1 3 4	Evolving perceptions of mental health in society Society today Current influences on the mental health and wellbeing of society

More information about synoptic assessment in these qualifications can be found in [Section 6.2 Synoptic assessment](#)

6 Assessment and grading

6.1 Overview of the assessment

Entry code	H098
Qualification title	OCR Level 3 Alternative Academic Qualification Cambridge Advanced National in Mental Health: Individuals & Society (Certificate)
GLH	180*
Reference	TBC
Total Units	Has two units: <ul style="list-style-type: none"> • Mandatory units F400, F402

Entry code	H198
Qualification title	OCR Level 3 Alternative Academic Qualification Cambridge Advanced National in Mental Health: Individuals & Society (Extended Certificate)
GLH	360*
Reference	TBC
Total Units	Has five units: <ul style="list-style-type: none"> • Mandatory units F400, F401, F402, F403 • and one other unit from F404 or F405

*the GLH includes assessment time for each unit

Unit F400: Fundamentals of mental health and the individual
90 GLH 1 hour 45 minute written exam 70 marks (70 UMS) Set and marked by us Calculators are not required in this exam Question types may include: <ul style="list-style-type: none">• Forced choice/controlled response questions.• Short answer, closed response questions.• Extended constructed response questions with points-based marks schemes.• Extended constructed response questions with levels of response marks schemes.
Unit F401: Mental health, wellbeing and society
60 GLH 1 hour 15 minute written exam 50 marks (50 UMS) Set and marked by us Calculators are not required in this exam Question types may include: <ul style="list-style-type: none">• Forced choice/controlled response questions.• Short answer, closed response questions.• Extended constructed response questions with points-based marks schemes.• Extended constructed response questions with levels of response marks schemes.
Unit F402: Supporting and promoting mental health in organisations
90 GLH OCR-set assignment Centre-assessed and moderated by us This set assignment has three practical tasks. It should take 12-15 GLH to complete.

Unit F403: Community-based support for mental health and wellbeing
60 GLH OCR-set assignment Centre-assessed and moderated by us This set assignment has two practical tasks. It should take 10-12 GLH to complete.
Unit F404: Supporting mental health and wellbeing with physical activity
60 GLH OCR-set assignment Centre-assessed and moderated by us This set assignment has three practical tasks. It should take 10-12 GLH to complete
Unit F405: Supporting mental health and wellbeing with outdoor and creative activities
60 GLH OCR-set assignment Centre-assessed and moderated by us This set assignment has three practical tasks. It should take 10-12 GLH to complete.

OCR-set assignments for NEA units are on our secure website, [Teach Cambridge](#). Each NEA assignment is live for two years. The intended cohort is shown on the front cover. It is important you use the correct NEA set assignment for each cohort, as starting a new cohort of Year 12 students on an NEA set assignment that has already been live for one year will mean that these students will only have one year to work on the assignment.

6.2 Synoptic assessment

Synoptic assessment is a built-in feature of these qualifications. It means that students need to use an appropriate selection of their knowledge, understanding and skills developed across each qualification in an integrated way and apply them to a key task or tasks.

This helps students to build a holistic understanding of the subject and the connections between different elements of learning, so they can go on to apply what they learn from these qualifications to new and different situations and contexts.

The externally assessed units allow students to gain underpinning knowledge and understanding relevant to mental health and wellbeing. The NEA units draw on and strengthen this learning by assessing it in an applied way.

It is important to be aware of the synoptic links between the units so that teaching, learning and assessment can be planned accordingly. Then students can apply their learning in ways which show they are able to make connections across the qualification. [Section 5.3](#) shows the synoptic links for each unit.

6.3 Transferable skills

These qualifications give students the opportunity to gain broad, transferable skills and experiences that they can apply in future study, employment and life.

Higher Education Institutions (HEIs) have told us that developing some of these skills helps students to transition into higher education.

These skills include:

- Communication
- Creativity
- Critical thinking
- Independent learning
- Presentation skills
- Problem solving
- Project and team-based working
- Referencing
- Reflection
- Research skills
- Self-directed study
- Time management
- Writing for different purposes.

6.4 Grading and awarding grades

Externally assessed units

We mark all the externally assessed units.

Each external assessment is marked according to a mark scheme, and the mark achieved will determine the unit grade awarded (Pass, Merit or Distinction). We determine grade boundaries for each of the external assessments in each assessment series.

If a student doesn't achieve the mark required for a Pass grade, we issue an unclassified result for that unit. The marks achieved in the external assessment will contribute towards the student's overall qualification grade, even if a Pass is not achieved in the unit assessment.

NEA units

NEA units are assessed by the teacher and externally moderated by us.

Each unit has specified Pass, Merit and Distinction assessment criteria. The assessment criteria for each unit are provided with the unit content in [Section 5.3](#) of this specification. Teachers must judge whether students have met the criteria or not.

A unit grade can be awarded at Pass, Merit or Distinction. The number of assessment criteria needed to achieve each grade has been built into each assignment. These are referred to as design thresholds. The table below shows the design thresholds for each grade outcome for the NEA assessments in these qualifications. The unit grade awarded is based on the **total** number of achieved criteria for the unit. The total number of achieved criteria for each unit can come from achievement of any of the criteria (Pass, Merit or Distinction). This is **not** a 'hurdles-based' approach, so students do **not** have to achieve **all** criteria for a specific grade to achieve that grade (e.g. all Pass criteria to achieve a Pass).

The number of assessment criteria achieved for an NEA unit will be classed as the raw mark. Teachers will assess students' work and identify the number of criteria (raw marks) achieved for each NEA unit. Our Moderators will moderate samples of work from each centre. This moderation

process may result in the number of assessment criteria (raw marks) achieved being changed. The final raw mark achieved after moderation has taken place will be converted into a mark on the Uniform Mark Scale (UMS) and will contribute towards the student's overall qualification grade. (More information about UMS is in the section [Calculating the qualification grades](#).)

To make sure we can keep outcomes fair and comparable over time, we will review the performance of the qualifications through their lifetime. The review process might lead to changes in these design thresholds if any unexpected outcomes or significant changes are identified.

Unit size (GLH)	60	90
Number of pass criteria	11	14
Number of merit criteria	6	8
Number of distinction criteria	5	6
Total number of criteria needed for a unit pass	9	12
Total number of criteria needed for a unit merit	13	17
Total number of criteria needed for a unit distinction	18	23
Total number of criteria available for the unit	22	28

If a student doesn't achieve enough criteria to achieve a unit Pass, we will issue an unclassified result for that unit. The number of criteria achieved will be converted into a mark on the Uniform Mark Scale (UMS) and will contribute towards the student's overall qualification grade, even if a Pass is not achieved in the unit assessment. More information about this is in the Section below ([Calculating the qualification grades](#)).

Qualifications

The overall qualification grades are:

Certificate and Extended Certificate

- Distinction* (D*)
- Distinction (D)
- Merit (M)
- Pass (P)
- Unclassified (U)

Calculating the qualification grades

When we work out students' overall grades, we need to be able to compare performance on the same unit in different assessments over time and between different units. We use a Uniform Mark Scale (UMS) to do this.

A student's uniform mark for each externally assessed unit is calculated from the student's raw mark on that unit. A student's uniform mark for each NEA unit is calculated from the number of criteria the student achieves for that unit. The raw mark or number of criteria achieved are converted to the equivalent mark on the uniform mark scale. Marks between grade boundaries are converted on a pro rata basis.

When unit results are issued, the student's unit grade and uniform mark are given. The uniform mark is shown out of the maximum uniform mark for the unit (for example, 48/60).

The student's uniform marks for each unit will be aggregated to give a total uniform mark for the qualification. The student's overall grade will be determined by the total uniform mark.

The tables below show:

- the maximum raw marks or number of criteria, and uniform marks for each unit in the qualifications
- the uniform mark boundaries for each of the assessments in each qualification
- the minimum total mark for each overall grade in the qualifications.

Certificate Qualification:

Unit	Maximum raw mark/number of criteria	Maximum uniform mark (UMS)	Distinction* (UMS)	Distinction (UMS)	Merit (UMS)	Pass (UMS)
F400	70	70	-	56	42	28
F402	28	70	-	56	42	28
Qualification Totals	98	140	126	112	84	56

Extended Certificate Qualification:

Unit	Maximum raw mark/number of criteria	Maximum uniform mark (UMS)	Distinction* (UMS)	Distinction (UMS)	Merit (UMS)	Pass (UMS)
F400	70	70	-	56	42	28
F401	50	50	-	40	30	20
F402	28	70	-	56	42	28
F403	22	55	-	44	33	22
F404	22	55	-	44	33	22
F405	22	55	-	44	33	22
Qualification Totals	192	300	270	240	180	120

You can find a marks calculator on the qualification page of our [website](#) to help you convert raw marks/number of achieved criteria into uniform marks.

6.5 Performance descriptors

Performance descriptors indicate likely levels of attainment by representative students performing at the Pass, Merit and Distinction grade boundaries at Level 3.

The descriptors must be interpreted in relation to the content in the units and the qualification as a whole. They are not designed to define that content. The grade achieved will depend on how far the student has met the assessment criteria overall. Shortcomings in some parts of the assessment might be balanced by better performance in others.

Level 3 Pass

At Pass, students show adequate knowledge and understanding of the basic elements of much of the content being assessed. They can develop and apply their knowledge and understanding to some basic and familiar contexts, situations and problems.

Responses to higher order tasks involving detailed discussion, evaluation and analysis are often limited.

Many of the most fundamental skills and processes relevant to the subject are executed effectively but lack refinement, producing functional outcomes. Demonstration and application of more advanced skills and processes might be attempted but not always executed successfully.

Level 3 Merit

At Merit, students show good knowledge and understanding of many elements of the content being assessed. They can sometimes develop and apply their understanding to different contexts, situations and problems, including some which are more complex or less familiar.

Responses to higher order tasks involving detailed discussion, evaluation and analysis are likely to be mixed, with some good examples at times and others which are less accomplished.

Skills and processes relevant to the subject, including more advanced ones, are developed in terms of range and quality. They generally lead to outcomes which are of good quality, as well as being functional.

Level 3 Distinction

At Distinction, students show thorough knowledge and understanding of most elements of the content being assessed. They can consistently develop and apply their understanding to different contexts, situations and problems, including those which are more complex or less familiar.

Responses to higher order tasks involving detailed discussion, evaluation and analysis are successful in most cases.

Most skills and processes relevant to the subject, including more advanced ones, are well developed and consistently executed, leading to high quality outcomes.

7 Non examined assessment (NEA) units

This section gives guidance on completing the NEA units. In the NEA units, students build a portfolio of evidence to meet the assessment criteria for the unit.

Assessment for these qualifications **must** adhere to JCQ's [Instructions for Conducting Coursework](#). Do **not** use JCQ's Instructions for Conducting Non-examination Assessments – these are only relevant to GCE and GCSE specifications.

The NEA units are centre-assessed and externally moderated by us.

You **must** read and understand all the rules and guidance in this section **before** your students start the set assignments.

If you have any questions, please contact us for help and support.

7.1 Preparing for NEA unit delivery and assessment

7.1.1 Centre and teacher/assessor responsibilities

We assume the teacher is the assessor for the NEA units.

Before you apply to us for approval to offer these qualifications you must be confident your centre can fulfil all the responsibilities described below. Once you're approved, you can offer any of our general qualifications, Cambridge Nationals or Cambridge Advanced Nationals **without** having to seek approval for individual qualifications.

Here's a summary of the responsibilities that your centre and teachers must be able to fulfil. It is the responsibility of the head of centre¹ to make sure our requirements are met. The head of centre must ensure that:

- there are enough trained or qualified people to teach and assess the expected number of students you have in your cohorts.
- teaching staff have the relevant level of subject knowledge and skills to deliver and assess these qualifications.
- teaching staff will fully cover the knowledge, understanding and skills requirements in teaching and learning activities.
- allowed combinations of units are considered at the start of the course to be confident that all students can access a valid route through the qualifications.
- all necessary resources are available for teaching staff and students during teaching and assessment activities. This gives students every opportunity to meet the requirements of the qualification and reach the highest grade possible.
- there is a system of internal standardisation in place so that all assessment decisions for centre-assessed assignments are consistent, fair, valid and reliable (see [Section 7.4.3](#)).
- there is enough time for effective teaching and learning, assessment and internal standardisation.
- robust processes are in place to make sure that students' work is individual and confirmed as authentic (see [Section 7.2.1](#)).

¹ This is the most senior officer in the organisation, directly responsible for the delivery of OCR qualifications, For example, the headteacher or principal of a school/college. The head of centre accepts full responsibility for the correct administration and conduct of OCR exams.

- OCR-set assignments are used for students' summative assessments. You must make sure that students use the assignment that is live for the period during which they are taking their summative assessment.
- OCR-set assignments are **not** used for practice. This includes both assignments that are currently live or live assignments that have expired. Sample assessment material for each of the NEA units is available on our [website](#). This sample assessment material can be used for practice purposes.
- students understand what they need to do to achieve the criteria.
- students understand what it means when we say work must be authentic and individual and they (and you) follow our requirements to make sure their work is their own.
- students know they must not reference another individual's personal details in any evidence produced for summative assessment, in accordance with the Data Protection Act 2018 and the UK General Data Protection Regulations (UK GDPR). It is the student's responsibility to make sure evidence that includes another individual's personal details is anonymised.
- outcomes submitted to us are correct and are accurately recorded and adhere to the published deadlines.
- assessment of set assignments adheres to the JCQ [Instructions for Conducting Coursework](#) and JCQ [AI Use in Assessments: Protecting the Integrity of Qualifications](#) .
- a declaration is made at the point you're submitting any work to us for assessment that confirms:
 - all assessment is conducted according to the specified regulations identified in the [Administration](#) area of our website,
 - students' work is authentic.
 - marks have been transcribed accurately.(Failing to meet the assessment requirements might be considered as malpractice.)
- centre records and students' work are kept according to these requirements:
 - students' work **must** be kept until **after** the unit has been awarded and any review of results or appeals processed. We cannot consider any review if the work has not been kept.
 - internal standardisation and assessment records must be kept securely for a minimum of three years after the date we've issued a certificate for a qualification.
- all cases of suspected malpractice involving teachers or students are reported (see [Section 7.3.1](#)).

7.2 Requirements and guidance for delivering and marking the OCR-set assignments

The assignments are:

- set by us.
- taken under supervised conditions (unless we specify otherwise in the assessment guidance)
- assessed by the teacher.
- moderated by us.

You can find the set assignments on our secure website, [Teach Cambridge](#).

The set assignments give an approximate time that it will take to complete all the tasks. These timings are for guidance only, but should be used by you, the teacher, to give students an indication of how long to spend on each task. You can decide how the time should be allocated between each task or part task. Students can complete the tasks and produce the evidence across several sessions. Students' evidence (either hard copy or digital) must be kept securely by the teacher and access to assessment responses must be controlled. Students aren't permitted to access their work in between the assessment sessions.

We will publish a new set assignment each year and they will be live for two years. Each new set assignment will be released on 1 June for teacher planning. You must not start delivery of live assignments with students until the live assessment dates, which are shown on the front cover. We strongly recommend you should use the set assignment released in the same calendar year as the new cohort starts to ensure they have two years for that assignment. You may be disadvantaging students if you allow new cohorts to use assignments which have already been live for a year. This is because the assignments for each unit are designed for students to access throughout their two years of study. This enables resubmission opportunities across academic years if needed. Students are allowed one resubmission of work based on the same live assignment. [Section 7.4.6](#) provides more information about resubmissions.

You must:

- only download set assignments from our secure website, [Teach Cambridge](#), and use a set assignment that is live for assessment for all summative assessment of students.
- have made unit entries before submitting NEA work for moderation.
- not share the set assignments with anyone from outside of your centre. These must only be shared with appropriate centre staff and students taking the assessments.
(More information about maintaining the integrity of assessment materials is in the JCQ document [General Regulations for Approved Centres General and Vocational qualifications](#).)
- make sure students know that they must not share assessment material or their own work with others, including posting or sharing on social media.
(More information is in the JCQ [guidance Information for candidates Using social media and examinations/assessments](#).)

Appendix A of this specification gives guidance for creating electronic evidence for the NEA units. Read Appendix A in conjunction with the unit content and assessment criteria grids to help you plan the delivery of each unit.

The rest of this section is about how to manage the delivery and marking of the set assignments so that assessment is valid and reliable. Please note that failing to meet these requirements might be considered as malpractice.

Here is a summary of what you need to do.

You **must**:

- have covered the knowledge, understanding and skills with your students and be sure they are ready for assessment **before** you start the summative assessment. This may include students practising applying their learning and receiving feedback from teachers in preparing to take the assessment.
- use the correct live OCR-set assignment for summative assessment of the students. The dates for which set assignments are live for summative assessment are shown on the front cover. These assignments are available on [Teach Cambridge](#).
- give students the [Student Guide](#) before they start the assessment.

- familiarise yourself with the assessment guidance relating to the tasks. The assessment guidance for each unit is in [Section 5](#) after the assessment criteria grids and with the student tasks in the assignments.
- make sure students are clear about the tasks they must complete and the assessment criteria they are attempting to meet.
- give students a reasonable amount of time to complete the assignments and be fair and consistent to all students. The estimated time we think each assignment should take is stated in the set assignments. In that time students can work on the tasks under the specified conditions until the date that you collect the work for centre assessment.
- tell the students the resources they can use in the assignment before they start the assessment tasks.
- only give students our templates. Where we think a template is useful for a task, we have provided it in the assignment. You must **not** give students any other templates to use when completing their live assignments. If they choose to use a different template from a book, a website or course notes (for example, to create a plan) they **must** make sure the source is referenced and that the template is not pre-populated with responses for which the students may gain marks.
- monitor students' progress to make sure work is capable of being assessed against the assessment criteria, on track for being completed in good time and is the student's own work:
 - NEA work must be completed in the centre under teacher supervision. Supervision is not invigilation. A supervised classroom does not require exam conditions in that classroom. This would typically be in normal curriculum time:
 - work must be completed with enough supervision to make sure that it can be authenticated as the student's own work. The supervising teacher must be teacher who will authenticate the students' work. You must be familiar with the requirements of the JCQ document [AI Use in Assessments: Protecting the Integrity of Qualifications](#) before assessment starts.
 - there may be exceptions to the requirement for supervised conditions if there is work to complete to support the assignment tasks (e.g. research). The assignment and assessment guidance will specify if there are exceptions.

Where students are allowed to complete work outside of supervised conditions (e.g. research that may be allowed between supervised sessions) you **must** make sure that they only bring notes relating to the work they are allowed to complete unsupervised into the supervised sessions (e.g. notes relating to the research they have done) and to make sure any work they have done is independent. They must not use unsupervised time as an opportunity to:

 - Create drafts of work for their tasks.
 - Gather information to use in other aspects of their tasks.
 - if you provide any material to prepare students for the set assignment, you must adhere to the rules on using referencing and on acceptable levels of guidance to students. This is in [Sections 7.2.3](#) and [7.3](#).
 - students must produce their work independently (see [Sections 7.2.1](#) and [7.3](#)).
 - you must make sure students know to keep their work and passwords secure and know that they must not share completed work with other students, use any aspect of another student's work or share their passwords.
- use the assessment criteria to assess students' work.

- before submitting a final outcome to us, you can mark students' completed work and allow them to repeat any part of the assignment, reworking their original evidence. We call this a reattempt. Students must have completed the whole assignment before you mark their work. Any feedback you give to students on the marked work, must:
 - be factual: telling the student what you have observed, not what to do to improve their work
 - be recorded
 - be available to the OCR assessor.

(See [Section 7.3 on Feedback](#) and [Section 7.4.4 on reattempting work](#)).

You **must not**:

- create your own assignments for students to use for practice or live assessment
- change any part of the OCR-set assignments (scenarios or tasks)
- mark students' work in stages, providing feedback at each stage. This would be iterative assessment which is not allowed
- accept multiple reattempts of work where small changes have been made in response to feedback. Marking and feedback must not be an iterative process.
- allow teachers or students to add, amend or remove any work **after** submission for moderation
- give detailed advice and suggestions to individuals or the whole class on how work may be improved to meet the assessment criteria. This includes giving access to student work as an exemplar
- allow students access to their assignment work between teacher supervised sessions. (There may be exceptions where students are allowed to complete work independently (e.g. research). Any exceptions will be stated in the assignments.)
- practise the live OCR-set assignment tasks with the students. We provide Sample Assignments for you to use for practice purposes.

7.2.1 Ways to authenticate work

All NEA work must be completed under teacher supervision (unless the assessment guidance for a specific task or sub-task advises otherwise). In addition, you must use enough supervision and complete enough checks to be confident that the work you mark is the student's own and was produced independently.

You should discuss work in progress with students, including asking them questions such as what they are planning/doing and why. This will make sure that work is being completed in a planned and timely way and will give you opportunities to check the authenticity of the work. This is not an opportunity to offer additional guidance to students.

You **must**:

- have read and understood the JCQ document [AI Use in Assessments: Protecting the Integrity of Qualifications](#)
- make sure students and other teachers understand what constitutes plagiarism and other forms of malpractice (e.g. collusion and copying)
- not accept plagiarised work as evidence
- use questioning as appropriate to confirm authenticity

- make sure students and teachers fill in authentication statements.

7.2.2 Group work

Group work is not allowed for the NEA assignments in these qualifications.

7.2.3 Plagiarism

Students must use their own words when they produce final written pieces of work to show they have genuinely applied their knowledge and understanding. When students use their own words, ideas and opinions, it reduces the possibility of their work being identified as plagiarised.

Plagiarism is:

- the submission of someone else's work as your own
- failure to acknowledge a source correctly, including any use of written material, the internet or Artificial Intelligence (AI).

You might find the following JCQ documents helpful:

- [Plagiarism in Assessments](#)
- [AI Use in Assessments: Protecting the Integrity of Qualifications](#)

Due to increasing advancements in AI technology, we strongly recommend that you are familiar with the likely outputs from AI tools. This could include using AI tools to produce responses to some of the assignment tasks, so that you can identify typical formats and wording that these may produce. This may help you identify any cases of potential plagiarism from students using AI tools to generate written responses.

Plagiarism makes up a large percentage of cases of suspected malpractice reported to us by our moderators. You must **not** accept plagiarised work as evidence.

Plagiarism often happens innocently when students do not know that they must reference or acknowledge their sources or aren't sure how to do this. It's important to make sure your students understand:

- the meaning of plagiarism and what penalties may be applied
- that they can refer to research, quotations or evidence produced by somebody else, but they must list and reference their sources and clearly mark quotations
- quoting someone else's work, even when it's properly sourced and referenced, doesn't evidence understanding. The student must 'do' something with that information to show they understand it. For example, if a student has to analyse data from an experiment, quoting data doesn't show that they understand what it means. The student must interpret the data and, by relating it to their assignment, say what they think it means. The work must clearly show how the student is using the material they have referenced to inform their thoughts, ideas or conclusions.

We have [The OCR Guide to Referencing](#) on our website. We have also produced a [poster](#) about referencing and plagiarism which may be useful to share with your students.

Teach your students how to reference and explain why it's important to do it. At Key Stage 5 they must:

- use quote marks to show the beginning and end of the copied work
- list the html address for website text and the date they downloaded information from the website

- show the name of the AI source used and the date the content was generated for computer-generated content *such as an AI Chatbot)
- for other publications, list:
 - the name of the author
 - the name of the resource/book/printed article
 - the year in which it was published
 - the page number.

Teach your students to:

- always reference material copied from the internet or other sources. This also applies to infographics (graphical information providing data or knowledge)
- always identify information they have copied from teaching handouts and presentations for the unit, using quote marks and stating the text is from class handouts.

Identifying copied/plagiarised work

Inconsistencies throughout a student's work are often indicators of plagiarism. For example:

- different tones of voice, sentence structure and formality across pieces of work
- use of American expressions, spellings and contexts (such as American laws and guidelines)
- dated expressions and references to past events as being current
- sections of text in a document where the font or format is inconsistent with other sections.

What to do if you think a student has plagiarised

If you identify plagiarised work during assessment or internal standardisation, you must:

- consider the plagiarism when judging the number of assessment criteria achieved. (You must not award assessment criteria where the work is plagiarised.)
- record that there is plagiarism in the work on the Unit Recording Sheet (URS) and that you have adjusted the number of assessment criteria achieved to take account of the plagiarism:
 - if the work is requested as part of the moderation sample, it must be provided to our Moderator with the other work requested.

If plagiarism is identified during ongoing monitoring of students' work, you can address this in your centre (for example, by instructing the student(s) involved to re-do the affected tasks).

If plagiarism is identified when the work has been submitted to you as final for marking, you must:

- report the student(s) for plagiarism in line with the JCQ document [Suspected Malpractice Policies and Procedures](#):
 - fill in the **JCQ form M1**.

In line with JCQ's policies and procedures on suspected malpractice, the penalties applied for plagiarism will usually result in the work not being allowed (disqualification) or the mark being significantly reduced.

7.3 Feedback

Feedback to students on work in progress towards summative assessment

You can discuss work in progress towards summative assessment with students to make sure it's being done in a planned and timely way. It also provides an opportunity to check the authenticity of the work. You must intervene if there's a health and safety risk (and reflect this in your assessment if the student's ability to operate safely and independently is part of the criteria).

Generic guidance to the whole class is also allowed. This could include reminding students to check they have provided evidence to cover all key aspects of the task. Individual students can be prompted to double check for gaps in evidence providing that specific gaps are not pointed out to them.

You can give general feedback and support if one or more students are struggling to get started on an aspect of the assignment or following a break between sessions working on the assignment. For example, if a student is seeking more guidance that suggests they are not able to apply knowledge, skills and understanding to complete their evidence, you can remind them that they had a lesson which covered the topic. The student would then need to review their own notes to find this information and apply it as needed.

If a student needs additional help to get started on an initial task that is critical to accessing the rest of the assessment, you can provide this help if you feel it is necessary, but you must not award the student with any assessment criteria directly associated with the part(s) of the task for which they received help. This must be recorded on the student's work and/or Unit Recording Sheet (URS) for our moderator to see. More information about how to record additional help given in these circumstances in [Section 7.4.1](#).

With the exception of the specific feedback allowed to help students start a critical task, mentioned above, feedback must not provide specific advice and guidance that would be construed as coaching. This would compromise the student's ability to independently perform the task(s) they are doing and constitutes malpractice. Our moderators use a number of measures to assure themselves the work is the student's own.

Assessing completed work

When students have completed their work on an assignment, you must assess it and give feedback to them on the completed work they submitted to you for assessment. ([Section 7.4.1](#) has more information about how to assess NEA work.) Assessment should not be an iterative process. This means you must not assess work and give feedback on it in stages. You must only assess the work when the assignment is complete.

Feedback **must**:

- be supportive, encouraging and positive.
- tell the student what has been noticed, not what you think (for example, if you have observed the student completing a task, you can describe what happened, what was produced and what was demonstrated).

Feedback **can**:

- identify what task and part of the task could be improved, but not say how to improve it. You could show the student work from a **different** unit that demonstrates higher achievement, but you must not detail to the student how they could achieve that in their work. If you are using another student's work from a different unit as an example, you must anonymise this work and make sure that the potential to plagiarise from this work is minimised. You could remind students that they had a lesson on a specific topic and that they could review their notes, but you must not tell them how they could apply the teaching to improve their work.

- comment on what has been achieved, for example ‘the evidence meets the P2 and M2 criteria’.
- identify that the student hasn’t met a command word or assessment criteria requirement. For example, ‘This is a description, not an evaluation’.
- use text from the specification, assignment or assessment criteria in general guidance to clarify what is needed in the work. For example, ‘You explained how your final survey design is effective (M6)’.

Feedback **must not**:

- point out specific gaps. For example, you must not prompt the student to include specific detail in their work, such as ‘You need to add one more key way the theme can affect mental health and wellbeing’.
- be so detailed that it leads students to the answer. For example, you must not give:
 - model answers
 - step-by-step guidance on what to do to complete or improve work
 - headings or prompts that include examples which give all or part of what students have to write about or produce.
- talk the student through how to achieve or complete the task.
- give detail on where to find information/evidence.

In other words, feedback must help the student to take the initiative in making changes. It must not direct or tell the student what to do to complete or improve their work in a way that means they do not need to think how to apply their learning. Students need to recall or apply their learning. You must not do the work for them.

Students can reattempt their work on an assignment after you have marked it and provided feedback. This **must** happen before the work is submitted to us for moderation. Neither you nor the student can add, amend or remove any work after the final mark has been submitted for moderation.

[Sections 7.4.4](#) and [7.4.6](#) give more guidance for students who wish to reattempt or resubmit their work following feedback.

What improper assistance might look like

When we see anything that suggests the teacher has led students to the answer, we become concerned because it suggests students have not worked independently to produce their assignment work. The following are examples of what might indicate improper assistance by the teacher:

- prompts that instruct students to include specific detail in their work, such as, ‘You need to include the aims of the activity. Who is it aimed at? What is the purpose of the activity? How will it benefit the specific group/individual?’
- headings or templates that include examples which give all or part of what students have to write about or produce, such as sources of support.

Our moderators will report suspected malpractice when they cannot see differences in content between students’ work in the sample they are moderating. An exception is when students have only used and referenced technical facts and definitions. If our moderator is in any doubt, they will report suspected malpractice. The decision to investigate or not is made by us, not the moderators.

7.3.1 Reporting suspected malpractice

It is the responsibility of the head of centre to report all cases of suspected malpractice involving teachers or students.

A JCQ Report of Suspected Malpractice form (JCQ/M1 for student suspected malpractice or JCQ/M2 for staff suspected malpractice) is available to download from the JCQ [website](#). The form must be completed as soon as possible and emailed to us at compliance@ocr.org.uk.

When we ask centres to gather evidence to assist in any malpractice investigation, heads of centres must act promptly and report the outcomes to us.

The JCQ document [Suspected Malpractice Policies and Procedures](#) has more information about reporting and investigating suspected malpractice, and the possible sanctions and penalties which could be imposed. You can also find out more on our [website](#).

7.3.2 Student and centre declarations

Both students and teachers must declare that the work is the student's own:

- **each student** must sign a declaration before submitting their work to their teacher. A **candidate authentication statement** can be used and is available to download from our [website](#). You must keep these statements in the centre until all reviews of results, malpractice and appeal issues have been resolved.
- **teachers** must declare the work submitted for centre assessment is the students' own work by completing a [centre authentication form \(CCS160\)](#) for each cohort of students for each unit. You must keep centre authentication forms in the centre until all post-results issues have been resolved.

7.3.3 Generating evidence

The set assignments will tell the students what they need to do to meet the assessment criteria for the NEA units. It is your responsibility to make sure that the methods of generating evidence for the assignments are:

- valid
- safe and manageable
- suitable to the needs of the student.

Valid

The evidence presented must be valid. For example, it would not be appropriate to present an organisation's equal opportunities policy as evidence towards a student's understanding of how the equal opportunities policy operates in an organisation. It would be more appropriate for the student to incorporate the policy in a report describing the different approaches to equal opportunities.

Safe and manageable

You must make sure that methods of generating evidence and approaches taken:

- are safe and manageable
- do not put unnecessary demands on the student
- are appropriate and in line with ethical standards and your centre's safeguarding responsibilities.

Suitable to the needs of the student

We are committed to ensuring that achievement of these qualifications is free from unnecessary barriers.

Observation and questioning

The primary evidence for assessment is the work submitted by the student, however the following assessment methods might be suitable for you to use for some aspects of these qualifications, where identified:

- **observation** of a student doing something
- **questioning** of the student or witness.

Observation

You and the student should plan observations together, but it is your responsibility to record the observation properly (for example observing a student undertaking a practical task). More information is in the Teacher Observation Records section.

Questioning

Questioning the student is normally an ongoing part of the formative assessment process and may, in some circumstances, provide evidence to support achievement of the criteria.

Questioning is often used to:

- test a student's understanding of work which has been completed outside of the classroom (where this may be permitted)
- check if a student understands the work they have completed
- collect information on the type and purpose of the processes a student has gone through.

If questioning is used as evidence towards achievement of specific topic areas, it is important that you record enough information about what they asked and how the student replied, to allow the assessment decision to be moderated.

7.3.4 Presentation of the final piece of work

Students must submit their evidence in the format specified in the tasks where specific formats are given. Written work can be digital (e.g. word processed) or hand-written and tables and graphs (if relevant) can be produced using appropriate ICT.

Any sourced material must be suitably acknowledged. Quotations must be clearly marked and a reference provided.

A completed Unit Recording Sheet (URS) must be attached to work submitted for moderation.

The URS can be downloaded from the qualification webpage or [Teach Cambridge](#). Centres **must** show on the URS where specific evidence can be found. The URS tells you how to do this.

Work submitted digitally for moderation **must** be in a suitable file format and structure. [Appendix A](#) gives more guidance about submitting work in digital format.

7.4 Assessing NEA units

All NEA units are assessed by teachers and externally moderated by our moderators. Assessment of the set assignments must adhere to JCQ's [Instructions for Conducting Coursework](#).

The centre is responsible for appointing someone to act as the internal assessor. This would usually be the teacher who has delivered the programme but could be another person from the centre. The assessment criteria must be used to assess the student's work. These specify the levels of skills, knowledge and understanding that the student needs to demonstrate.

7.4.1 Applying the assessment criteria

When students have completed the assignment, they must submit their work to you to be assessed.

You must assess the tasks using the assessment criteria and any additional assessment guidance provided. Each criterion states what the student needs to do to achieve that criterion (e.g. Summarise the needs of an individual). The command word and assessment guidance provide additional detail about breadth and depth where it is needed.

You must judge whether each assessment criterion has been **successfully achieved** based on the evidence that a student has produced. For the criterion to be achieved, the evidence must show that all aspects have been met in sufficient detail.

When making a judgement about whether a criterion has been **successfully achieved**, you must consider:

- the requirements of the specific NEA task that the student is completing
- the criterion wording, including the command word used and its definition
- any assessment guidance for the criterion
- the unit content that is being assessed.

You must annotate the work to show where evidence meets each criterion (see [Section 7.4.2](#)). You can then award the criterion on the Unit Recording Sheet (URS). Assessment should be positive, rewarding achievement rather than penalising failure or omissions.

The number of criteria needed for each unit grade (Pass, Merit or Distinction) is provided in [Section 6.4](#).

You must complete a Unit Recording Sheet (URS) for each unit a student completes. On the URS you must identify:

- whether the student has met each criterion or not (by adding a tick (✓) or X in the column titled **Assessment criteria achieved**)
 - you should also indicate where the evidence can be found if a '✓' is identified
 - a X indicates that there is insufficient evidence to fully meet the criterion or it was not attempted.
- the total number of criteria achieved by the student for the unit. The total number of criteria achieved is their 'raw mark'

You must be convinced, from the evidence presented, that students have worked independently to the required standard.

If you have given additional, more specific support or guidance to an individual student to get them started on a task, because they could not start a task or part of a task that was **critical to them**

accessing the rest of the task or assignment (see [section 7.3](#)), this **must** also be recorded on the student's work and/or Unit Recording Sheet (URS) for our moderator to see. In this situation, the student should **not** be awarded the assessment criteria for the work for which they received help, and the number of criteria achieved must be adjusted appropriately. Recording this on the student's work and/or URS will help our moderator to understand why the assessment criteria have not been awarded.

Your centre must internally standardise the assessment decisions for the cohort **before** you give feedback to students (see [Section 7.4.3](#)). When you are confident the internal assessment standardisation and appeals process is complete, you can submit work for moderation at the relevant time. You **must not** add, amend or remove any work after it has been submitted to us for final moderation. Work **must** be kept securely until the end of the review of results process.

7.4.2 Annotating students' work

Each piece of NEA work must show how you are satisfied the assessment criteria have been met.

Comments on students' work and the Unit Recording Sheet (URS) provide a means of communication about assessment decisions made between teachers during internal standardisation, and with our moderators if the work is part of the moderation sample. (Comments or annotations must not be used as a method of communication with our moderator for any other reason.)

7.4.3 Internal standardisation

It is important that all teachers are assessing work to common standards. For each unit, centres must make sure that internal standardisation of outcomes across teachers and teaching groups takes place using an appropriate procedure.

This can be done in a number of ways. In the first year, reference material and our training meetings will provide a basis for your centre's own standardisation. In following years, this, and/or your own centre's archive material, can be used. We advise you to hold preliminary meetings of staff involved to compare standards through cross-marking a small sample of work. After you have completed most of the assessment, a further meeting at which work is exchanged and discussed will help you make final adjustments.

If you are the only teacher in your centre assessing these qualifications, we still advise you to make sure your assessment decisions are internally standardised by someone else in your centre. Alternatively, this could be a teacher that may be delivering in another local centre or as part of your Multi Academy Trust (MAT) if levant. Ideally this person will have experience of these types of qualifications, for example someone who:

- is delivering a similar qualification in another subject
- has relevant subject knowledge.

You must keep evidence of internal standardisation in the centre for our moderators to see.

We have a [guide](#) to how internal standardisation can be approached on our website.

7.4.4 Reattempting work to improve the grade before submitting marks to us

As described in [Section 7.2](#), **before** submitting a final outcome to us for external moderation, you can allow students to repeat any element of the assignment and rework their original evidence. We refer to this as a reattempt. A reattempt allows the student to reflect on **internal** feedback, and to improve their work. A reattempt is **not** an iterative process where students make small modifications through ongoing feedback to eventually achieve the desired outcome.

Any feedback **must** be noted by the teacher and a record of this kept in centre. We have provided a feedback form for this purpose, which can be found on our [website](#) and [Teach Cambridge](#). We recommend that you use the feedback form we provide or create your own recording form.

To summarise, a reattempt is a process that is internal to the centre. This allows students to rework their evidence:

- after it has been marked by you as a complete assignment
- before it is submitted to us as the final work.

A reattempt **must** be done before submission for external moderation. When a student submits the work to you as final for external moderation, they **must not** complete any further work on any aspect of it.

7.4.5 Submitting outcomes

When you have assessed the work and it has been internally standardised, outcomes can be submitted to us. For the purpose of submission, outcomes will be considered as 'marks'. You will submit the total number of criteria achieved for units as marks. You must have made entries before you can submit marks. You can find the key dates and timetables on our [website](#).

There should be clear evidence that work has been attempted and some work produced. If a student does not submit any work for an NEA unit, the student should be identified as being absent from that unit.

If a student completes any work at all for an NEA unit, you must assess the work using the assessment criteria and award the appropriate number of criteria. This might be zero.

7.4.6 Resubmitting moderated work to us to improve the grade

We use the term 'resubmission' when referring to student work that has previously been submitted to us for moderation. Following moderation, if you and the student feel they have not performed at their best during the assessment, the student can, with your agreement, improve their work and resubmit it to you again for assessment and to us for external moderation. You must be sure it is in the student's best interests to resubmit the work for assessment. There is one resubmission opportunity per NEA assignment. If you have submitted the same assignment twice for a student, they will need to use the next live assignment for any further reattempt and resubmission.

Students can only resubmit work using the **same** assignment if the assignment is still live. The live assessment dates and intended cohort will be shown on the front cover of the assignment. We will not accept work based on an assignment that is no longer live. If the assignment is no longer live, students will need to produce work using the new live assignment for the unit for the resubmission.

If students are resubmitting using a new live assignment, they can use the evidence they produced for the previous assignment, but they will need to make any changes that are necessary so that the work meets the requirements of the new scenario and task.

Students can also build on the work to improve it. All work for a resubmission must be completed under the required teacher supervised conditions and marked against the assessment criteria and assessment guidance. You must not over direct students on how to adapt/improve work to meet the requirements of the new assignment. You must adhere to all requirements relating to giving and recording feedback from [Section 7.3](#) and [Section 7.4.4](#).

To summarise, a resubmission is the reworking and submitting of assignment evidence and marks to us, following previous external moderation by us.

7.5 Moderating NEA units

The purpose of external moderation is to make sure that the standard of assessment is the same for all centres and that internal standardisation has taken place.

The administration pages of our [website](#) give full details about how to submit work for moderation.

This includes the deadline dates for entries and submission of marks. For moderation to happen, you must submit your marks by the deadline.

7.5.1 Sample requests

Once you have submitted your marks, we will tell you which work will be sampled as part of the moderation process. Samples will include work from across the range of students' attainment.

Students' work must be securely kept until after the unit has been awarded and any review of results and appeals windows are closed.

Centres will receive the final outcomes of moderation when the provisional results are issued. Results reports will be available for you to access. More information about the reports that are available is on our [administration pages](#).

We need sample work to help us monitor standards. We might ask some centres to release work for this purpose. We will let you know as early as possible if we need this from you. We always appreciate your co-operation.

DRAFT

8 Administration

This section gives an overview of the processes involved in administering these qualifications. More information about the processes and deadlines involved at each stage is on our [administration pages](#).

8.1 Assessment availability

There are two assessment opportunities available each year for the externally assessed units: one in January and one in June. Students can be entered for different units in different assessment series.

All students must take the exams at a set time on the same day in a series.

NEA assignments can be taken by students at any time during the live period shown on the front cover. It is important you use the set assignment that is released in the same calendar year as the new cohort starts to ensure that students have two years to use the assignment.

There are two windows each year to submit NEA outcomes.

You must make unit entries for students before you can submit outcomes for a visit. All dates relating to NEA moderation are on our administration pages.

Qualification certification is available at each results release date.

8.2 Collecting evidence of student performance to ensure resilience in the qualifications system

Regulators have published guidance on collecting evidence of student performance as part of long-term contingency arrangements to improve the resilience of the qualifications system. You should review and consider this guidance when delivering this qualification to students at your centre.

For more detailed information on collecting evidence of student performance please visit our [website](#).

8.3 Equality Act information relating to Cambridge Advanced Nationals

The Cambridge Advanced Nationals require assessment of a broad range of skills and, as such, prepare students for further study and higher-level courses.

The Cambridge Advanced National qualifications have been reviewed to check if any of the competences required present a potential barrier to disabled students. If this was the case, the situation was reviewed again to make sure that such competences were included only where essential to the subject.

8.4 Accessibility

There can be adjustments to standard assessment arrangements based on the individual needs of students. It is important that you identify as early as possible if students have disabilities or particular difficulties that will put them at a disadvantage in the assessment situation and that you choose a qualification or adjustment that allows them to demonstrate attainment.

If a student requires access arrangements that need approval from us, you must use [Access arrangements \(online\)](#) to gain approval. You must select the appropriate qualification type(s) when you apply. Approval for GCSE or GCE applications alone does not extend to other qualification

types. You can select more than one qualification type when you make an application. For guidance or support please contact our [Special Requirements Team](#).

The responsibility for providing adjustments to assessment is shared between your centre and us. Please read the JCQ document [Access Arrangements and Reasonable Adjustments](#).

If you have students who need a post-exam adjustment to reflect temporary illness, indisposition or injury when they took the assessment, please read the JCQ document [A guide to the special consideration process](#).

If you think any aspect of these qualifications unfairly restricts access and progression, please email Support@ocr.org.uk or call our Customer Support Centre on **01223 553998**.

The following access arrangements are allowed for this specification:

Access arrangement	Type of assessment
Reader/Computer reader	All assessments
Scribes/Speech recognition technology	All assessments
Practical assistants	All assessments
Word processors	All assessments
Communication professional	All assessments
Language modifier	All assessments
Modified question paper	Timetabled exams
Extra time	All assessments with time limits

8.5 Requirements for making an entry

We provide information on key dates, timetables and how to submit marks on our [website](#).

Your centre must be registered with us as an approved centre before you enrol students and can make entries. Centre approval should be in place well in advance of making your first entries. Details on how to register with us are on our [website](#).

8.5.1 Making estimated unit entries

Estimated entries are not needed for Cambridge Advanced National qualifications.

8.5.2 Making final unit entries

When you make an entry, you must state the unit entry codes and the component codes. Students submitting work must be entered for the appropriate unit entry code from the table below.

The short title for these Cambridge Advanced Nationals is CAN AAQ. This is the title that will be displayed on Interchange and some of our administrative documents.

Individual unit entries should be made for each series in which you intend to submit or resubmit an NEA unit or sit an externally assessed examination.

Make a certification entry using the overall qualification code (see [Section 8.6](#)) in the final series only.

Unit entry code	Component code	Assessment method	Unit titles
F400	01	Written paper	Fundamentals of mental health and the individual
F401	01	Written paper	Mental health, wellbeing and society
F402	01	Moderation	Supporting and promoting mental health and wellbeing in organisations
F403	01	Moderation	Community-based support for mental health and wellbeing
F404	01	Moderation	Supporting mental health and wellbeing with physical activity
F405	01	Moderation	Supporting mental health and wellbeing with outdoor and creative activities

8.6 Certification rules

You must enter students for qualification certification separately from unit assessment(s). If a certification entry is **not** made, no overall grade can be awarded. These are the qualifications that students should be entered for:

- OCR Level 3 Alternative Academic Qualification Cambridge Advanced National in Mental Health: Individuals & Society (Certificate) - certification code TBC.
- OCR Level 3 Alternative Academic Qualification Cambridge Advanced National in Mental Health: Individuals & Society (Extended Certificate) - certification code TBC.

8.7 Unit and qualification resits

Students can resit the assessment for each unit and the best result will be used to calculate the certification result. Students may resit each externally assessed unit twice before certification.

Resit opportunities must be fair to all students and **not** give some students an unfair advantage over other students. For example, the student must not have direct guidance and support from the teacher in producing further evidence for NEA units. When resitting an NEA unit, students must submit new, amended or enhanced work, as detailed in the JCQ [Instructions for Conducting Coursework](#).

When you arrange resit opportunities, you must make sure that you do not adversely affect other assessments being taken.

Arranging a resit opportunity is at the centre's discretion. Summative assessment series must not be used as a diagnostic tool and resits should only be planned if the student has taken full advantage of the first assessment opportunity and any formative assessment process.

8.8 Post-results services

A number of post-results services are available:

- Reviews of results - if you think there might be something wrong with a student's results, you may submit a review of marking or moderation.
- Missing and incomplete results - if an individual subject result for a student is missing, or the student has been omitted entirely from the results supplied you should use this service.
- Access to scripts - you can ask for access to marked scripts.
- Late certification - following the release of unit results, if you have not previously made a certification entry, you can make a late request, which is known as a **late certification**. This is a free service.

Please refer to the JCQ [Post-Results Services booklet](#) and our [Administration page](#) for more guidance about action on the release of results.

For each NEA unit, a review of moderation can only be requested for the cohort. It cannot be requested for individual students.

Appendix A: Guidance for the production of electronic evidence

Structure for evidence

The NEA units in these qualifications are units F402-F405. For each student, all the tasks together will form a portfolio of evidence, stored electronically. Evidence for each unit must be stored separately.

An NEA portfolio is a collection of folders and files containing the student's evidence. Folders should be organised in a structured way so that the evidence can be accessed easily by a teacher or OCR moderator. This structure is commonly known as a folder tree. It would be helpful if the location of particular evidence is made clear by naming each file and folder appropriately and by use of an index called 'Home Page'.

There should be a top-level folder detailing the student's centre number, OCR candidate number, surname and forename, together with the unit code (F402-F405), so that the portfolio is clearly identified as the work of one student.

Each student's portfolio should be stored in a secure area on the centre's network. Before submitting the portfolio to us, the centre should add a folder to the folder tree containing the internal assessment and summary forms.

Data formats for evidence

It is necessary to save students' work using an appropriate file format to minimise software and hardware capability issues.

Students must use formats appropriate:

- to their evidence
- for viewing for assessment and moderation.

Formats must be open file formats or proprietary formats for which a downloadable reader or player is available. If a downloadable reader or player is not, the file format is **not** acceptable.

Evidence submitted is likely to be in the form of word-processed documents, presentation documents, digital photos and digital video.

All files submitted electronically must be in the formats listed on the following page. Where new formats become available that might be acceptable, we will give more guidance. It is the centre's responsibility to make sure that the electronic portfolios submitted for moderation are accessible to our moderator and fully represent the evidence available for each student.

Standard file formats acceptable as evidence for the Cambridge Advanced Nationals are listed here.

File type	File format	Max file size*
Audio	.3g2 .3ga .aac .aiff .amr .m4a .m4b .m4p .mp3 .wav	25GB
Compression	.zip .zipx .rar .tar .tar .gz .tgz .7z .zipx .zz	25GB
Data	.xls .xlsx .mdb .accdb .xlsb	25GB
Document	.odt .pdf .rtf .txt .doc .docx .dotx .	25GB
Image	.jpg .png .jpeg .tif .jfif .gif .heic .psd .dox .pcx .bmp .wmf	25GB
Presentation	.ppt .pptx .pdf .gslides .pptm .odp .ink .potx .pub	25GB
Video	.3g2 .3gp .avi .flv .m4v .mkv .mov .mp4 .mp4v .wmp .wmv	25GB
Web	.wtmp .mts .mov-1 .mp4-1 .xspf .mod .mpg	25GB

If you are using **.pages** as a file type, please convert this to a **.pdf** prior to submission.

*max file size is applicable when using our Submit for Assessment service.

[Submit for Assessment](#) is our secure web-based submission service. You can access Submit for Assessment on any laptop or desktop computer running Windows or macOS and a compatible browser. It supports the upload of files in the formats listed in the table above as long as they do not exceed the maximum file size. Other file formats and folder structures can be uploaded within a compressed file format.

When you view some types of files in our Submit for Assessment service, they will be streamed in your browser. It would help our moderator or examiner if you could upload files in the format shown in the table below:

File type	File format	Chrome	Firefox
Audio	.mp3	Yes	Yes
Audio	.m4a	Yes	Yes
Audio	.aac	No	Yes
Document	.txt	Yes	Yes
Image	.png	Yes	Yes
Image	.jpg	Yes	Yes
Image	.jpeg	Yes	Yes
Image	.gif	Yes	Yes
Presentation	.pdf	Yes	Yes
Video	.mp4	Yes	Yes
Video	.mov	No	Yes
Video	.3gp	Yes	No
Video	.m4v	Yes	Yes
Web	.html	Yes	Yes
Web	.htm	Yes	Yes

Appendix B: Command Words

External assessment

The table below shows the command words that will be used in exam questions. This shows what we mean by the command word and how students should approach the question and understand its demand. Remember that the rest of the wording in the question is also important.

Command Word	Meaning
Analyse	<ul style="list-style-type: none"> Separate or break down information into parts and identify their characteristics or elements Explain the different elements of a topic or argument and make reasoned comments Explain the impacts of actions using a logical chain of reasoning
Annotate	<ul style="list-style-type: none"> Add information, for example, to a table, diagram or graph
Calculate	<ul style="list-style-type: none"> Work out the numerical value. Show your working unless otherwise stated
Choose	<ul style="list-style-type: none"> Select an answer from options given
Compare	<ul style="list-style-type: none"> Give an account of the similarities and differences between two or more items or situations
Complete	<ul style="list-style-type: none"> Add information, for example, to a table, diagram or graph to finish it
Describe	<ul style="list-style-type: none"> Give an account that includes the relevant characteristics, qualities or events
Discuss (how/whether/etc)	<ul style="list-style-type: none"> Present, analyse and evaluate relevant points (for example, for/against an argument) to make a reasoned judgement
Draw	<ul style="list-style-type: none"> Produce a picture or diagram
Explain	<ul style="list-style-type: none"> Give reasons for and/or causes of something Make something clear by describing and/or giving information
Give examples	<ul style="list-style-type: none"> Give relevant examples in the context of the question
Identify	<ul style="list-style-type: none"> Name or provide factors or features from stimulus
Label	<ul style="list-style-type: none"> Add information, for example, to a table, diagram or graph until it is final
Outline	<ul style="list-style-type: none"> Give a short account or summary
State	<ul style="list-style-type: none"> Give factors or features Give short, factual answers

Non examined assessment (NEA)

The table shows the command words that will be used in the NEA assignments and/or assessment criteria.

Command Word	Meaning
Adapt	<ul style="list-style-type: none"> Change to make suitable for a new use or purpose
Analyse	<ul style="list-style-type: none"> Separate or break down information into parts and identify their characteristics or elements Explain the different elements of a topic or argument and make reasoned comments Explain the impacts of actions using a logical chain of reasoning
Assess	<ul style="list-style-type: none"> Offer a reasoned judgement of the standard or quality of situations or skills. The reasoned judgement is informed by relevant facts
Calculate	<ul style="list-style-type: none"> Work out the numerical value. Show your working unless otherwise stated
Classify	<ul style="list-style-type: none"> Arrange in categories according to shared qualities or characteristics
Compare	<ul style="list-style-type: none"> Give an account of the similarities and differences between two or more items, situations or actions
Conclude	<ul style="list-style-type: none"> Judge or decide something
Describe	<ul style="list-style-type: none"> Give an account that includes the relevant characteristics, qualities or events
Discuss (how/whether/etc)	<ul style="list-style-type: none"> Present, analyse and evaluate relevant points (for example, for/against an argument) to make a reasoned judgement
Evaluate	<ul style="list-style-type: none"> Make a reasoned qualitative judgement considering different factors and using available knowledge/experience
Examine	<ul style="list-style-type: none"> To look at, inspect, or scrutinise carefully, or in detail
Explain	<ul style="list-style-type: none"> Give reasons for and/or causes of something Make something clear by describing and/or giving information
Interpret	<ul style="list-style-type: none"> Translate information into recognisable form Convey one's understanding to others, e.g. in a performance
Investigate	<ul style="list-style-type: none"> Inquire into (a situation or problem)
Justify	<ul style="list-style-type: none"> Give valid reasons for offering an opinion or reaching a conclusion
Research	<ul style="list-style-type: none"> Do detailed study in order to discover (new) information or reach a (new) understanding
Summarise	<ul style="list-style-type: none"> Express the most important facts or ideas about something in a short and clear form

We might also use other command words but these will be:

- commonly used words whose meaning will be made clear from the context in which they are used (e.g. create, improve, plan)
- subject specific words drawn from the unit content.

Contact the team at:

☎ 01223 553998

🌐 ocr.org.uk

To stay up to date with all the relevant news about our qualifications, register for email updates at ocr.org.uk/updates

Visit our Online Support Centre at support.ocr.org.uk



CAMBRIDGE
UNIVERSITY PRESS & ASSESSMENT

OCR is part of Cambridge University Press & Assessment, a department of the University of Cambridge.

OCR is a Company Limited by Guarantee and an exempt charity. Registered in England. Registered office: The Triangle Building, Shaftesbury Road, Cambridge, CB2 8EA. Registered company number: 3484466.

We operate academic and vocational qualifications regulated by Ofqual, Qualifications Wales and CCEA as listed in their qualifications registers.

We are committed to providing a fully accessible experience across all our products, platforms, and websites. Find out more about our [accessibility standards](#).

© OCR 2025. All rights reserved. We retain the copyright on all our publications. However, our registered centres are permitted to copy and distribute our material for their own internal use, in line with any specific restrictions detailed in the publication. Find out more about our [copyright policies](#).

We update our publications regularly so please check you have the most up-to-date version.

We cannot be held responsible for the persistence or accuracy of URLs for external or third-party internet websites referred to in this publication and do not guarantee that any content on such websites is, or will remain, accurate or appropriate.

When we update our specifications, you'll see a new version number and a summary of the changes. While we do our best to reflect these changes in all associated resources on [Teach Cambridge](#), if you notice any discrepancies, please refer to the latest specification on our website and [let us know](#).

Our resources do not represent any teaching method we expect you to use. We cannot be held responsible for any errors or omissions in our resources.