

# **Course Companion**

for BTEC Tech Award L1/2 in Health & Social Care

Component 2: Health and Social Care Services and Values

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### Teacher's Introduction

This is a Course Companion for Component 2: Health and Social Care Services and Values, part of the BTEC Level 1 / Level 2 Tech Award in Health and Social Care (first teaching 2022). The purpose of this resource is to guide students through the core content of this component, providing them with in-depth information that covers each of the specification points. This resource aims to provide students with the knowledge skills, attributes and values required when giving care. Students will also explore the different types of health and social care services and the barriers to accessing them.

For clarity and ease of use, the content of this Course Companion matches the order of the specification points. Firstly, Learning Aim A of this component is covered, which is for students to understand the different types of health and social care services available and the barriers to accessing them. This section covers specification points A1, A2 and A3. The second part of the Course Companion covers Learning Aim B, which concerns understanding the skills, attributes and values required to give care. This section covers specification points B1, B2, B3 and B4.

Throughout the resource there are key features to keep an eye out for:

**Keywords:** used to draw students' attention to different keywords of the unit.



### Did you know?

Provides further information and additional content to inspire students.

### Case studies

Help students to apply the issues identified in the resource to real-world scenarios.



**Applied activities** encourage application of knowledge to the case studies or to real-world scenarios in the health and social care sector.

Research activities inspire further research and stretch and challenge higher-ability students

Some of the activities can be completed using either computers, mobile phones or tablets to aid students' research, and/or be completed outside the classroom as homework.

There is also a set of 'checking my understanding' questions provided at the end of each section (with answers included). These should help students recap their knowledge throughout the Course Companion, and will ensure that they have understood what they have read.

January 2024

## Learning Outcome A: Understand the different types of heal and barriers to accessing them

## A1: Health services and A2: Social

Everybody will need to access some kind of health and social care service in their

- In England in September 2023 there were 32.6 million appointments with generatices and primary care networks (groups of surgeries). However, around were for COVID vaccinations.<sup>1</sup>
- One in six young people aged 5–16 in England experiment d a mental health was an unusual year due to the COVID-19 page nice.
- The population is ageing, meaning the present living longer but are also conditions (such as dementing as a smallt.3

Therefore, at would happen when you're not well, or if you needed some

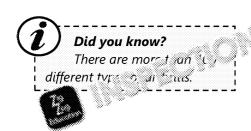
Current estimates for spending by the UK's Department of Health and Social Care money helps to provide a huge variety of health and social care services, provide staff. This is essential for meeting the different needs that each individual might information covered in this section will help you to meet Learning Outcomes A1 understanding a range of types of health and social care services, and which services

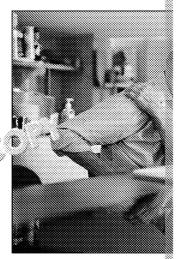
However, it is not always easy for everyone to access these services. Depending a factors relating to the service itself, it might be very hard for someone to receive time. The third part of Learning Outcome A is to learn about different barriers per access health and social care services, and ways in which these barriers might be

### What are some common health conditions?

In the United Kingdom, some of the most common health conditions which peop

Arthritis – this is a general term for conditions often causing tiredness along with joint pain and stiffness due either to joint inflammation (for example, rheumatoid arthritis) or to wear and tear (as in osteoarthritis).





NHS Digital - https://digital.nhs.uk/data-and-information/publications/statistical/appointments/ 2023#:~:text=32.6%20million%20appointments%20were%20estimated,million%20were%20com



NHS Digital – https://digital.nhs.uk/data-and-information/publications/statistical/mental-heal england/2020-wave-1-follow-up

Age UK - https://www.ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/wellbeing/age-uk-briefing-state-of-health-and-care-july-2023-abridged-version.pdf

<sup>4</sup> www.ons.gov.uk

Cardiovascular conditions – these are diseases of the heart and blood vessels. Bublood vessels can cause narrowed or blocked blood vessels.

If narrowing occurs in the blood vessels supplying the heart muscle, this is called **coronary or ischaemic heart disease** and can lead to a heart attack, during which oxygen flow to the heart muscle is reduced so much that there is damage to the heart. The heart may then be less able to pump effectively, or the electrical signals across the heart may be disrupted, leading to abnormal or irregular heart rhythms. A severe heart attack can stop the heart pumping altogether (cardiac as set).

Stroke (previously called cerebro a brain condition most often caus blood vessels of the brain. Fatty pbrain lead to narrowing which incollocking the blood supply to part often be caused by a bleed in the stroke include one or more of: a clinability to hold up the arm on the slurred. In a siscal or absent spectroke are as brain cells are being neural assistance is needed. This government's Act FAST campaign

### Act FAST to economie symptoms of a stroke:



F for face

if you notice a droop or useven smile on a person's face, this is a warning sign.



A for arms

Arm numbroes or westures can be a wearing sign. You can ask the person to raise their arms if you are misure. It's a warring sign if the arm drops down or last't steady.



S for speech difficulty

Ask the person to repeat something. Sharred speech can indicate that the person is having a stroke.



T for time

Act fast if someone is experiencing simke symptoms.

**Diabetes (type 2)** — insulin is vital to control blood glucose levels. People with type enough effective insulin, so their blood glucose levels tend to be (mostly) too high Uncontrolled diabetes can lead to serious health complications, such as cardioval problems and more.

Dementia – this is an umbrella term covering a range of conditions such as Alzheimer's disease and multi-infarct dementia which cause progressive memory loss together with loss of independence and the ability to carry out daily activities, such as remembering the order of clothes to put on when getting dressed. Symptoms vary depending on the type of dementia and the individual here luced thinking speed, difficulty making decisions, language replaces (such as using the wrong words), difficulty under ling, impaired judgement and mood changes or typical or dementia. As dementia progresses, physical symptoms are reduced mobility and sometimes in a secome more common. However, the person may be emarkable responses to approaches which are meaningful to them.

Research story and dancer No had dem the end so choreogn listening by an or

Here is a **zzed.uk**/



<sup>5</sup> Symptoms of dementia – NHS (https://www.nhs.uk/conditions/dementia/symptoms-and-diag

Obesity – overweight and obesity are defined by the World Health Organization accumulation that presents a risk to health'. On a chart showing body mass index 30 is classed as overweight, and a BMI of 30 or over is classed as obese. BMI is calculated in kilograms by their height in metres squared. Having too little or too must some illnesses and makes having some medical procedures, such as operations, need to be adjusted for people whose BMI is above or below the ideal range.

### Respiratory conditions affect the lungs, such as:

- Chronic obstructive pulmonary disease (COPD) primarily caused by smoking lung damage.
- Asthma a chronic inflammatory condition of the airways that can lead to reathlessness and coughing.

Both of these conditions can result in break and may significantly diminsevere cases, they can also lead to a lead to be a line on in life expectancy.



Men Mealth difficulties impact a person's mood, thinking, behaviour and and depression, eating disorders, experiences such as hearing voices, and many formerly known as Improving Access to Psychological Therapies (IAPT), was start or over can refer themselves online for an assessment. Mental health services for include the NHS Child and Adolescent Mental Health Service (CAMHS) and char

Individuals may also have additional needs related to:

Sensory issues	Physical issues	
Some people have poor eyesight and/or hearing,	Physical issues	In t
difficulties with balance, leading to falls, or loss of	such as reduced	typ
taste, reducing enjoyment of food. Some individuals	mobility may	diff
have reduced sensation, such as numbness, which	arise from long-	diff
causes increased risk; for example, being unaware of	term health	diff
injuries. Some individuals (for example people on the	conditions or	can
autism spectrum) experience sensory overload in busy	disabilities.	abo
settings, leading to extreme anxiety.		

'Impairment' is a term used less often in health and social care as this has been demodel' view, whereas individuals with disabilities more often have a 'social mode problem not to be their disability but the way that society reacts to it. They note unable to access a building is being disabled by the lack of the matter than the





Obesity – WHO (https://www.who.int/health-topics/obesity)

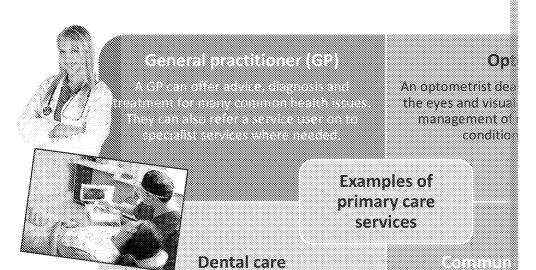
### What are the different healthcare services ava-

Healthcare services are provided to people who need help with their physical or service user in lots of different ways. They may provide a service user with an ex symptoms, recommend a particular course of treatment or therapy, prescribe m on to another service for more suitable care. Visits to a healthcare service might regular check-up, or might involve a more long-term course of care with frequer several different types of healthcare service.

The National Health Service (NHS) also uses a range of online strategies to help r pressure on healthcare services, and make the delivery of services more efficien many doctor's surgeries now allow you to book appointment or request medical online portal, rather than contacting the surgery have so in person. Many see now have electronic Summary Care Records and means that key information stored securely online. These hav \_\_\_\_\_ in commation sharing easier and faster for

Primary

es are usually a person's first contact with a healthcare practi Primary card of everyday health services. Primary care services can be accessed directly, mea referral to use them.



user's teeth, gums and mouth. They help service users to improve their oral hygiene, and can carry out some procedures such as

the removal of unhealthy teeth.

A dentist looks at the health of a service

However, those listed in the diagram ' Hov , and not the only providers of prima

- Pharmacists provide and an ambarcation and ensure medicines are hand
- Hearing care and the life with hearing difficulties by providing devices such
- a 🔐 contraception clinics can conduct sexual health screen e on contraception options and pregnancy.
- **Community midwives** provide advice and support to pregnant women an

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Out-of-hours services (for evenings, nights and weekends, as many primary care Monday to Friday 8am to 6pm). Possible options for people seeking out-of-hour

- Deputising doctor services in some areas, service users who phone their departs a recorded message advising them of an alternative phone number to GP working as part of a doctor's deputising service.
- 111 service telephoning 111 gives access to advice on the most appropriate operators can arrange an appointment at a local out-of-hours clinic if required
- Out-of-hours GP clinic some areas operate out-of-hours GP clinics in the emay be located at a local hospital. They usually require an appointment, both the 111 telephone service.
- Walk-in clinics are available in larger towns and cities. No appointment is no long. Walk-in clinics may be nurse-led, with nurse or oners able to pres
- Minor injury clinics are available in some urh and registron people with injuries smaller, uncomplicated bone fractu ຂອງ se clinics are nurse-led and X-ravusually only open until arcuse 8 ເ
- Private GP consult າ າ ວ "ne for those who can afford to pay the fee, private GP consult າ າ ວ "ne for those who can afford to pay the fee, private GP consult າ າ ວ "ne for those who can afford to pay the fee, private GP consult າ າ ວ "ne for those who can afford to pay the fee, private GP consult າ າ ວ "ne for those who can afford to pay the fee, private GP consult າ າ ວ "ne for those who can afford to pay the fee, private GP consult າ າ ວ "ne for those who can afford to pay the fee, private GP consult າ າ ວ "ne for those who can afford to pay the fee, private GP consult າ າ ວ "ne for those who can afford to pay the fee, private GP consult າ າ ວ "ne for those who can afford to pay the fee, private GP consult ne fee, private GP consu

Anyone with a life-threatening or serious illness or injury can be seen any time at **Department** (formerly known as Accident and Emergency, or Casualty). This is set than primary care. If attending as a 'walk in' service user, the individual will be set degree of urgency for assessment by a doctor or an emergency nurse practitione.

### Case study – a day in the life of a 111 call han

Chelsea is a 111 call handler. She takes calls for the NHS 111 service, which the have a health query which they do not think requires an emergency (999) respons

Chelsea's day is varied, and can include:

- assessing callers with a range of health issues such as abdominal pain, those shealth difficulty, a pregnant woman in early labour, or someone worried absomember. Chelsea has on-screen prompts to help her ask the right questions, a callers' responses.
- triage calls (to decide which need the most urgent response) and arranging advice, such as a call from one of the 111 service's clinical practitioners or the
- if Chelsea's assessment suggests that the caller's situation is more urgent than
  can arrange for an ambulance. If necessary, Chelsea talks the caller through
  straight away, such as how to carry out basic resuscitation. Sometimes Chelses
  problem is not as serious as the caller fears, so Chelsea can offer them reass
- callers may be anxious, upset or aggressive, so Chelsea uses communication showing empathy and keeping calm. If Chelsea is finding a call difficult, she team leader. Following a particularly upsetting collection and be offered extra break.

The work of a 111 call handler is were apportant as it is often difficult for the public information and support the public properties of the public information and support the properties of the public information and support the properties of the public information and support the public properties of the public information and support the public properties of the pub

Watch to (

n ore on call handlers: zzed.uk/12505-NHS111 and zzed.uk

Applied activity: Rank all the different
Primary Care providers according to which you
think are the most used by the general population,
with '1' being the most used provider. Discuss your
reasoning with a partner.

Research activity: like to train as a 11 process that needs qualifications you no 111 call handler.

# 



### Secondary care

The term 'secondary care' refers to services that are more specialised than prima care, and can provide highly focused medical care for service users with more conneeds. Secondary care services are often equipped with more specialised facilities equipment, have *specialist* staff trained in a particular set of skills, and are usually based in a hospital.

Accessing secondary care usually needs a referral from another healthcare professional, such as a GP. For example, a GP might refer someone to a specialist diabetes clinic if the service user has a particular set of needs that cannot be methe GP. Doctors working in respiratory medicine are also providers of secondary Respiratory medicine services can help people with health and blems related to breathing, such as asthma, or those who have dagget to the services.

Further examples of secondar at reliable:

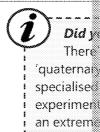
- Respiratory medici reas service users with conditions affecting their all lungs, satisfies (bouts of narrowing and swelling of the airways) and el (damage acs in the lungs).
- Rheumatology treats inflammation of the joints, muscles and/or soft tissue
- Cardiology for service users with conditions affecting the electrical and/or action of the heart.
- Endocrinology a specialty for individuals with diseases affecting their endo (hormone-secreting) glands; for example, insulin secretion by the pancreas a
- Urology medicine related to the urinary tract
- Psychology services that aim to treat mental health conditions such as depress
- Renal medicine healthcare professionals in renal medicine work with servil kidney failure
- Dermatology concerned with the health of the skin and management of skill
- Vascular surgery to treat disease of the veins or arteries

**Applied activity:** Have you or one of your relatives ever been to a secondary can how well the services provided met the needs of you or your relative. (To maint provide details which could identify the person or healthcare staff, such as name



### Tertiary care

Tertiary care can be even more specialised. People may also come into contact with a tertiary care service when they have highly complex medical needs, such as an unusual disease. An example of a tertiary care service is neurosurgery (surgery to treat diseases of the brain and other parts of the nervous system).



Other examples of tertiary care services include:

10000000	Diagnosis and treatment of cancer (for example, chemoth
Oncology (cancer	helps service users and their families to cope with the effe
management)	treatment. Oncology services in the total treatment clinics when
inanagement)	treatment, day services for organizes and chemotherapy
***************************************	treatments, and அரு அடிகளை services for people needing
	Perform Fergions on the heart (for example, heart valve
	Solve is weat people who have developed heart disease the
Cardiac su	ູ້ ທ່າວ were born with heart conditions. Some individuals ne
CardiaC Su	seen by transplantation services – a very specialised NHS 🍇
	transplantation of organs (including eyes, kidneys, heart, l
	donor and their family to care of the recipient and their fa
Intensive	Care provided to newborn babies who have been born pre
neonatology	Support is also given to parents.
<b>3</b>	The appropriate dressing of severe burns to support the h
Severe burns	chances of infection. Intensive care also given to those who
treatment	injuries (due to fluid loss, for example). Also provides servi
3000000	with the emotional and psychological impacts of their burn

The term 'tertiary care' also covers **residential care**. This means when somebody to move into a specialist home to receive the right kind of care, and can include services such as nursing homes. Nursing homes are designed to meet the health needs of elderly or disabled residents, and are staffed 24/7. Staff at nursing home have a varied role, including helping residents to wash and dress, maintain a nut diet, take the right medication, and engage in enjoyable recreational activities. Nursing homes are likely to be fitted with specialist equipment to aid the mobility residents, such as hoists (for lifting residents who have reduced mobility) and speadapted bathrooms. They may also have a particular unit dedicated to caring for people with memory problems, such as dementia, as these residents have a part set of needs.

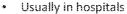
Hospices are another form of tertiary care, and provide *pall'r ive care* for people towards the end of their lives, or people facing in mixing illness, previously called terminal illness. Hospices too iconomic day services and short stays for symptom control. They are an advantaged to make service users as comfortable as possible during an advantage by providing individualised the analysis who work in hospices, including nurses, doctors, therapists are recially trained volunteers. They can help the service user with pain relief and help relieve other distressing symptoms such as nausea and psychological and emotional support, and also provide support to the service user

A referral is needed to receive tertiary care, which will probably come from a GP or a specialised nature of some forms of tertiary care, service users might have to travel



- Common health issues
- · First point of contact
- Can access directly no referral needed
- Can be in clinics or community
- Can refer on to specialists

**Primary care** 



- Staff skilled in managing particular conditions
- Specialist equipment provided for assessment and treatment
- · Referral usually needed

Secondary care



### How do the services work together?

Primary, secondary and tertiary care ser as all orden need to work together to user. Because each service user is an an amount of the that will need to be mela as a secondary way.

If a service the ends a primary care service and the professional determines to suitable for treating the problem, the service user will be referred on to a more at the healthcare need, this could be either a secondary or tertiary care service. Retalso come from secondary care services. For example, following an operation for (secondary care), it may be determined that it is not safe for the service user to the service user may be referred for an assessment to move into a nursing home.

In many cases, communication will go both ways between primary, secondary and tertiary care providers. A hospital providing secondary care to the service user should routinely communicate the outcome of tests and the treatment to the service user's general practitioner (primary care). For example, a service user sent to have a *biopsy* in hospital might have a copy of their results sent back to the GP.

Biop tissum of the under indicasery

Effective communication between different healthcare professionals and services quality care. This helps to ensure that care is provided in the most seamless way user), with the right assessments and treatments carried out.

### Case study - how might someone receive primary, secondary

Alice is 80 years old, and has terminal lung cancer. She is currently receiving palliative care in a hospice (tertiary care). Alice initially visited her general practitioner (primary care) five years ago where a cough would not go away, and she was becoming short of breath and frequently. Her GP made a referral for Alice to go into hospital a lave her lungs examined, as he was concerned. The production (secondary care) identified lung cancer, and Area was a course of radiotherapy, which helped to slow the care and hospice when the hospital doctors determined that she has a few months remaining to live. At the hospice, staff help Alice to be confortable, manage her pain, and provide her and her family with emotional support.

Applied activity: Identify another health condition and explain how the different healthcare providers (primary, secondary and tertiary), can help meet their needs.

Applied acs study above the process from differes



### Allied health professions

The allied health professions are those that provide healthcare outside medicine health services can be accessed directly by self-referral, but sometimes another make a referral. The allied health professions provide healthcare in a wide range for some examples of allied health professions, and what they do.

Examples of allied health professions

paaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaa	
	Physiotherapy (sometimes called 'physical therapy')
	helps people who have problems with their joints,
	soft tissue and/or bones. Physiotherapy can also
	help people who have brain conditions impacting
	mobility, balance and coording to a, such as a
Physiotherapy	stroke, and children vitledes 'spmental delay. A
	physiothera: 'm , we a number of techniques
	such 💮 xer 😒 merapy or manual therapy (using
	່ວິດ ການ (activities in warm
	water) to treat the problem and improve strength, bala
	improves mobility and helps the individual to be more i
	Someone might be seen by an occupational therapist if t
	everyday life tasks, such as dressing, or maintaining a ho
Occupational	disability or ageing. The occupational therapist will help to
therapy	the obstacles they are facing. Occupational therapists wo
	assessing individuals. Occupational therapists can arrang
	such as cutlery with grips, and adaptations to the home,
Crook and	Speech and language therapists (SLTs) help people with
Speech and	who have problems speaking or understanding languag
language therapy	have difficulties swallowing.
	Dieticians are experts on the science of nutrition, and c
Dieticians	simple advice for service users on how to improve their
	can advise people with particular medical needs on the

These are not the only allied health professions. Some more include the following:

- Art, drama or music therapy use of the creative arts to improve well-being, psychological health, selfexpression and self-reflection
- Paramedics usually work in ambulances, providing emergency medical care outside hospital
- Podiatrists support individuals with disorders and problems of the foot, ankle and lower leg. They also deal in-growing toenails and σ τη τ
- Prosthetics help apple, and fit devices to replace a missing body ; imple, people born without a limb or who have lost due to injury
- Thei cutic radiography using doses of radiation to treat conditions s

**Applied activity:** For one or more of the allied health professionals mentioned, residucation and training) needed to pursue a career in your chosen profession(s).

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### Multidisciplinary team working

Different allied health services will often work together to provide high-quality casecondary or tertiary healthcare services. For example, a nursing home (tertiary conduct regular visits to the home to check the health of residents' feet and provide different services may also make referrals between one another, as and when change or develop. Family doctors (general practitioners / GPs) can refer services community services such as district nurses. Many therapists refer to each other (see

It is worth reiterating the importance of good communication between healthcaressential to ensuring that service users do not 'slip through the cracks' and fail to

'Multidisciplinary' means two or more disciplines (profession). working together. team (MDT) meetings involving doctors, nurses, alreading such professionals, support example. In health and social care, multiples and ary team working can be rewarded for service users. All can learn from each confer and achieve far more as a team the

However, the professionals have different trained expects. Doctors may expect that they will be the lead professionals in challenged by other professions, such as clinical psychologists working in mental health, social services and education may all be involved in supporting an individual skills, viewpoints and a range of ways of working to the MDT team.

Professionals do not always fully understand the role of others – for example, the are also experts in assessing and supporting people with swallowing difficulties.

If multidisciplinary working is to be successful, professionals need to respect and professionals, to communicate with colleagues from other professions and to inclinate main family carer in decision-making.

### Case study - allied health professions working to

Robert is a 70-year-old man with a diagnosis of Parkinson's disease, which has no difficult for him to swallow. A referral is made for him by a Parkinson's disease at to be visited by a speech and language therapist, who teaches Robert some stray make swallowing easier. For example, Robert learns which postures and head postelled him to swallow better, and the therapist arranges for some equipment (for especialised straw) that will also aid him. However, the speech and language there a little concerned that Robert's diet is not nutritious enough. Therefore, the therapisanother referral for Robert, this time for a dietician. The dietician and speech and therapist visit Robert together, and work out the best way to take into account Robert dietary preferences, while still making sure his diet is head and that he is able his food safely.

Applied activity: Care, the new of another allied health profession that might be needs? We will have professional to do help Robert?

# 



### What are the different social care services ava

Social care services are services that provide practical support with various aspect safely to children and adults. People may end up needing this kind of support be difficult circumstances preventing them from living independently at home, such problems, disability, vulnerability, or long-term health issues. These services are funded by the government or council, but there may be certain criteria that some to meet in order to be eligible for a particular service.

### Services for children and young people

Sometimes, children may not get their needs met by their current living situation statistics show that there were 83,840 'looked-after children' in England in March including adopted children. These were living in care on whis d by the council. To council may step in to ensure that a child is not a wrist on harm or abuse and is able healthy way. This might mean that the file the come under the responsibility of the local of original sometimes known as 'being taken into correct the control of the local of th

There is a value of services for children and young people, which include foster care and residential care. Youth work may also be beneficial for a range of young people (either inside or outside the care system). Look at the table for information on what these services are and what they do for children and young people.

Looked-after of describe children by the local aut looked-after if the authority's care court rules they

Types of service available for children and young people

Type of service	What is it?	How does it su
Foster care	Foster care is when a child goes to stay with another family in their home. This can happen	Foster care provides a child with a environment. Placement can be so long-term (often up to 18 years of return home.
***************************************	while a court is deciding whether or not it is safe for a child to live at home.	Respite foster care (for example, holidays) can be provided for disa regular caregivers to have a breal
Residential care	Residential care often involves several children living in the same home, with specially trained staff present.	Sometimes, a foster placement modified to stay. This could be becaus have not worked well, the young carers, a suitable foster placement person might have additional need therefore, a residential service mode the home help children to develous tay safe may also have a specific may also have a specific children to develous the home help children to develous the home help children to develous tay safe may also have a specific may also have a specific children to develous the home help children the home help c
Youth wo	Youth work is a bine to term and aim to involve children and young people in constructive activities.	Your work services aim to prome development in a range of areas. might help someone to build their self-esteem and develop new skill Youth work might also help a you person to build relationships, wo effectively with others and engaging recreational activities.

Applied activity: Design a leaflet that could be sent out to new parents who are looking to become foster carers to outline the main purpose of foster caring and what they will need to do.

Reses Reses needs 

https://explore-education-statistics.service.gov.uk/find-statistics/children-looked-after-in-engli

### Case study – why is respite foster care valual

Anna is a single parent to Ben, who is eight years old and has severe learning and physical disabilities. Ben is deaf, cannot communicate verbally, and needs 24/7 support to meet all of his health needs. Anna also has two other teenage children sometimes feels very overwhelmed.

For the last six months, Ben has been staying overnight at a local respite service disabled children once a week. Staff at the respite service are experienced and activities that he loves, as well as ensuring he is safe and healthy. This means that week from the responsibilities of caring for Ben. Sometimes she uses these evening children, friends and other family members. She also might with up on some error herself, knowing that Ben is being well cared for.

Applied activity: Record to the Anna's case study above, and answer the following

- Whre he is a pas of the respite service for Ben?
- What we benefits of the respite service for Anna and other members of the
- Can you think of any disadvantages of the respite service or any problems Be using the service?







## Adults or children with specific needs – what are these needs, are available?

There is a range of social services available to people with specific needs, and so is an essential part of helping lots of people in society. For instance, it is estimates there are 1.5 million people living with a learning disability in the UK,<sup>8</sup> and many will need some form of social care to live a safe and healthy life.

Local authority (council) expenditure on adult social care in 2021–2022 was £19 addressing the challenges posed by an ageing population and the diverse care requirements of adults.

### Learning disabilities

What is a learning disability? Learning disabilities of act some one's ability to learn, used and retain information, which can affect their some munication skills and ability to look themselves. A person with a looking of ability may struggle with verbal communication, writing and abality learning. Here are some examples of different conditions a look of acting learning disabilities that you may have heard of:

- Cerebra the most common cause is if a baby suffers a brain injury or deprivation of oxygen during birth. Cerebral palsy is primarily a physical health condition, but may also result in learning disabilities.
- Down's syndrome caused by having an extra chromosome.
- Fragile X syndrome occurs as a result of a mutation of a gene on the X chromosome.

### Research activity:

Look up each the three conditions listed above (cerebral palsy, Down's syndrome, fragile X syndrome). What are the core, or common, features of each condition?

Everybody with a learning disability is different disabilities varies from individual to individual. meaning that the person needs very little supposemeone might have a profound or severe learn have little or no ability to perform tasks for the round-the-clock support to stay safe and healt

Services for people with learning disabilities can meet many different

needs. For example, day centres and social clubs offer opportunities to socialise with other people and engage in enjoyable activities. Day centres and clubs can be vital for people's mental health, preventing isolation and promoting inclusion in the local community. Social care professionals may also help people with learning disabilities to function and live safely within their own home by aiding them to maintain a household are as cooking and dressing. Services can also assist people with Larning disabilities training or employment opportunities.

### ະ e ແມ່ນy – attending a day centre

Andrew is a 30-year an with learning disabilities. Twice a week, he goes to centre. He has made sometimes, there are day trips out to fun and interesting places centre have been helping him to learn new skills such as budgeting and using a chave also helped him to look for training and employment opportunities.

**Applied act** needs are be



https://www.mentalhealth.org.uk/learning-disabilities/help-information/learning-disability-st

<sup>9</sup> Adult Social Care Funding (England) – House of Commons Library (parliament.uk) (https://com/ briefings/cbp-7903)

### Sensory impairment

People who have a sensory impairment may struggle to live safely without suppoint impairments are:

- visual (blindness or sight loss)
- auditory (deafness or hearing loss)

People with sensory impairment may be offered a range of services that can suppose example, a service might help someone to find suitable housing, obtain equipmen from their sensory impairment (for example, flashing doorbells for someone with care assistant or support worker to help them with daily living tasks. Services also to provide advocacy (ensuring that someone's rights are protected and their views.

### Long-term health issues

Some health issues that people face will aff them wer a long period of time – per their entire life. Some examples of was the physical health conditions are given be

- Occurs following showing showing showing showing after birth, perhaps starvation of oxygen to the baby or an injury
- · Affects a person's movement
- Can manifest as problems with coordination, stiff limbs, or uncontrolled movements and tremors (shaking)
- Can also cause learning disabilities in some cases

- Brain disorder characterised by 'seizures' – abnormal electrical activity in brain
- Seizures can manifest as uncontrolled shaking or jerking, losing consciousness, collapsing
- Treatment options include medication and surgery

### **Cerebral palsy**

### **Epilepsy**

- Some people may suffer longterm pain in a particular area of their body
- Arthritis is a chronic condition involving pain and inflammation in the joints – commonly affected areas include the hands and hips
- Exercise, physical therapy and painkiller medication can be beneficial for some people
- Results from issues with the hormone insulin, which regulates the body's blood sugar levels
- In diabetes, blood sugar levels are too high
- Common symptoms include fatigue, blurred vision, excess thirst and slow healing of wounds
- Eating healthily and regular blood sugar chair help to

**Chronic pain** 









Some social services may be able to provide specialist care for people with particular long-term physical health conditions. This might be done with a combination of employing staff with specific skills and knowledge, and having the right equipment and facilities available. For instance, a residential care home may have staff who are specially trained to deliver emergency medication to people with epilepsy to alleviate a potentially life-threatening seizure.



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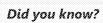
Type insulation on contract

Social services may also be equipped with the right tools to provide care to people whose health problems result in a disability – for example, there may be hoists (devices to lift a person) for aiding people with severe movement difficulties to receive personal are.

Long-term health issues may also be related a placen's mental health. A mental health problem file to meone's thought processes, their feelings to the haviour, and can make it very hard for that on the mormal life.

### Examples of antal health problems and some common symptoms

	Depression		Schizophrenia		
	Long-term low mood	•	<i>Hallucinations</i> – seeing,	*	
*	Feelings of hopelessness or worthlessness	*	feeling or hearing things that are not really there  Delusions – strong belief in	*	
	Reduced motivation Feeling tearful	*	things that are not true Disorganised speech Unusual thought patterns	*	000000000000000000000000000000000000000
*	Fatigue and appetite changes		Avoidance of social interaction		
	Suicidal thoughts or plans		Poor self-care		



While term 'schizophrenia' literally means 'split mind' (originating that the condition involves split or multiple personalities is a myth. The called 'dissociative identity disorder' and is very rare.



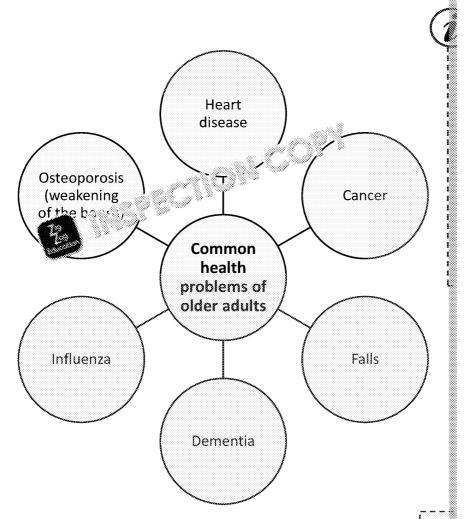
Social care services can help people with long-term neways. For example, there are specialist residential services with mental health issues at these services negligible people to build their coppractical with as encouraging people to particular housing issues and supporting them in finding

Alternatively, someone with a mental health problem them in their own home to help them with any need their support worker might help them to maintain the appointments.



### Needs of older adults

As people age, they might need some additional help to stay safe and maintain to occur because of changes to people's health as they age. Look at the spider diag kinds of health condition that someone might be more likely to experience as the



Many older adults have multiple health needs, or health conditions which are interlinked and impact each other. For instance, someone with osteoporosis might suffer the effects of a fall more severely than someone without osteoporosis – this is because their bones are weaker and are more likely to break. Broken bones are likely to result in a visit to hospital for an older adult, which may put them at the additional risk of contracting a hospital 'superbug', which can be fatal.

Case stud: - re: ::ential service for older ad

Jim is 90, and is living in case are care home for older adults. His room is cless comfortable but he sees struggles to walk safely to the bathroom as he has received such a like a calculate to help him get around. The staff are kind to Jim when speak to help him get around. The staff are kind to Jim when speak to help him get around. The staff are kind to Jim when speak to help him conversations are usually quite brief and he would like more of for social interaction. He loves to read, but unfortunately his sight has deteriorate been waiting for a while for an optometrist to visit the home to hopefully help him new glasses with a better prescription. His dietician has also recommended that is gluten-free diet, but there are not many gluten-free meal options for him at the

**Applied activity:** The case study above highlights how Jim's care needs are not be an email to the care service providers to suggest some ways to improve the care the

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Social care services can be tailored specifically to the needs of older adults. For excorridors can reduce the risk of an older adult having a fall. Staff in residential unin caring for people with dementia, and may help them to remember past events making a memory scrapbook.

Some older people may be able to live mostly independently but have regular vishousehold tasks or for companionship. The two main ways that social care is proper in the table below. However, which are described in the table below. However, are not only provided to older adults – some adults and children who have stress types of service.

Types of social care services for adults and children with confidenceds

Type of service	vat does the service d
Residential care	If someone goe in a nome that provides specialist residentiand to sails is sometimes also called a 'care how sails' areare because it is no longer safe for them to aremselves. Specially trained staff can help people to live
	meeting the complex and varied needs they might have
Supported living	Adults with disabilities or long-term health conditions now with support workers available to help them gain indepelore in 'warden controlled' apartments so they can call for
Personal assistants	Local authority funding (such as direct payments) is awa
and support	with disabilities to pay for a personal assistant or suppo
workers	their own home and access education, employment, an
Respite care	Respite services provide short-term care for someone ware gular caregivers a break. Respite care can be provided temporarily, or the person might go to a residential unit
Domiciliary care	Sometimes known as 'home care services', domiciliary can their own homes with many daily living tasks. A care work several times a day, or just briefly once a week — it all deep the diagram also illustrates a few needs that domiciliary  Cooking and feeding  Cooking and feeding  What can domiliciary care help with?  Medication  Budgeting and finances
Day centres	Day centres and social clubs help people to meet others also support service users to engage in enjoyable activiting gardening and cooking. Service users may also go on day also be put on by day centres.

# 



Applied activity: In the left-hand column are particular needs that someone might column are different social care services that might be able to help. Copy the column atch needs to services. Think – which service could help which group of people? It answer. You could also do this activity with a partner and discuss your reasoning.

Specific needs
Learning disabilities
Sensory
impairment
Long-term health
issues
Older adults

Services for spe
Residential care
Respite care
Domiciliary care
Day centres

The role 🕼 or all care

Informal care in the provided to somebody with a disability or with health need neighbours. In this context, 'informal' means that the person providing care is not 2021 census, five million people were identified as providing unpaid care for love

### Who can act as an informal carer? What might they do?

There are several people in someone's life who could be providers of informal so

### For example:

- A husband, wife or partner a service user's spouse usually knows them be providing care in a way that respects the service user's beliefs and individual spouse as an expected part of marriage or partnership. Caring duties may indress, take medication, attend appointments, access education, work or less informal carers of people with dementia, for example, may need to be alert leaving a gas cooker on, forgetting to eat properly, or leaving the house and complex role if the family member has multiple or serious physical and men.
- Parents of children and adults with physical disabilities and/or learning disabilities or health conditions (for example, supporting a son or daughter who is undergoing treatment for cancer).
- A friend a trusted friend might come over for frequent visits, to provide companionship and help with some household tasks such as cleaning or preparation of meals.
- A neighbour they might check on the person's well-being (particularly if they haven't been seen for a few days), or help them with maintenance of their home and garden.



<sup>10</sup> Key facts and figures | Carers UK (https://www.carersuk.org/policy-and-research/key-facts-and

### Challenges of providing informal care<sup>11</sup>

Although many people feel strongly that looking after their loved one or neighbor of caring for someone else can have a significant impact on their own health and

As informal carers may not be trained in the same way as formal care staff are, and they may undertake risky activities while caring for their relative. For example, they may attempt to lift or move the service user in a way that can damage their own back. Informal carers may also suffer from *burnout* due to the emotional and psychological impact of caring for someone else, particularly if they do not often have a break. They may also care for more than one person or have children, which can lead to a lot of competing responsibilities for the carer.

Bus of it to em

The State of Caring 2022 report by Carers 11 at Many carers are struggling health. A fifth said their physical hand a bad or very bad (21%) and 30% said very bad. Over a quarter for a (29%) said they felt lonely often or always. 12 The considerable of the said they felt lonely often or always solution makes experience.

Additionally, caring for someone can have a financial impact. This is because it make time off work to meet the person's needs, perhaps due to a change in circumunreliable paid care staff. Under some circumstances, a carer can claim 'Carer's benefit to help carers with the financial impact of looking after someone. Although the eligible if:<sup>13</sup>

- they do not have a weekly income in excess of £120 (after tax and expenses)
- they spend at least 35 hours per week providing care to the person
- they are over 16 and not studying for over 21 hours per week
- the person being cared for receives one of several benefits

However, some carers are likely to have some other taxable benefits reduced (for Payment) if they claim Carer's Allowance.

It is important to also acknowledge the positive aspects of being an informal care deepening their relationships, being purposeful and doing something worthwhile and perspectives on what matters in life.





https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthandwells paidcareprovisionisthereanimpactonhealthandeconomicposition/2013--05--16

<sup>12</sup> https://www.carersuk.org/media/p4kblx5n/cukstateofcaring2022report.pdf

<sup>13</sup> https://www.gov.uk/carers-allowance

### Voluntary care

Organisations which provide free services to people needing care include charities based organisations. Sometimes these voluntary sector services plug gaps in the social care), particularly out of hours. Rethink Mental Illness and the Samaritans helplines staffed by volunteers for individuals who are in mental distress. Callers Point of Access service in Sheffield after 5pm, during the night or at weekends he they phone the Rethink Mental Illness helpline or Samaritans.

**Applied activity:** Copy and complete the table below. It contains several example someone might have – can you think of a service that could be appropriate for the one possible answer – the first has been done for you.

 Need	A young person who cannot live at home, but foster care is ગુલ currently કરાદ હાદ	A perran with क्रा ेना कु disability who is socially isolated	An adult who car longer live safely home
 Service	dren's residential care		





### A1 and A2 checking my understanding

- 1. Explain primary care, secondary care and tertiary care.
- 2. Provide **three** examples each for the following: primary care services and tertiary care services.
- 3. What does a physiotherapist do?
- 4. Explain what is meant by multidisciplinary team working.
- 5. Describe three types of social care services for children and young
- 6. Explain why an elderly adult may move ant residential care, and a service may support them.
- 7. Give three functions of a comiciliary care service.
- 8. Discui advantages and disadvantages of being an informal care
- 9. Outline the roles of the voluntary sector in supporting individuals wi
- 10. Read the following case study:

Jonathan is a 60-year-old man who has recently lost his sight in an all with family after being discharged from hospital, but is soon due to lives alone. Social services have completed an assessment and have modifications to the property to make it safer for Jonathan. For example, to his staircase, and trip hazards will be removed from the property drive, he is worried about being able to maintain his friendships and harder for him to get out and about. Jonathan also needs to take seve each day, and he is concerned that he might take the wrong medical longer read the labels. Jonathan feels very low about the accident, a returning to live alone. None of his friends or family has been throughe would like to speak to others who can identify with his current sits.

- a) Which new needs does Jonathan have after losing his sight? I
- b) Assess the suitability of the health and social care services prohis needs have been met, and how? Which have not been met.





### Learning Aim A: Understand the different types of health an barriers to accessing them

## A3: Barriers to accessing s

Barriers in this context are factors which make it difficult for people to access health and social care. Although there are many health and social care services available, they are not always easy for people to use or get to. NHS England reports that about 7.9 million NHS appointments were missed in the year 2021–2022. It is very important that we inderstand why people sometimes are not able to access service a law mg this understanding will help service providers to better health or social care service to more people.

Barth

There are many factors which act as 'barriers' to service access, meaning they proparticular have a service. These barriers arise for lots of different reservice itself—example, long waiting lists or service users unsatisfied with NHS inspectors) or they can be factors which relate to the service user.

By the end of this section, you will understand the different types of barrier that these barriers can be overcome. This will help you to meet Learning Aim A.

### Physical barriers

There may be physical barriers that prevent people from accessing health and so 'physical' barriers refers to characteristics of the physical environment which ma contact with health and social care providers. Imagine you are a wheelchair user affect your ability to enter a building such as a dentist's office. How would you o you get to the second floor?



Approaching and entering a building can be difficult for some server required to park some distance away from the entrance, and the distance away from the entrance, and the distance parking space might act as a barrier for those with limited mobilimb stairs, which can be impossible or unsafe for many people distance on the weather conditions, the floor outside might also hazard. Manually opening a door may also be hard for some, because of the weight and movement involved.

Once inside the service, there are further physical barriers that someone could have to face before getting to their appointment. See ample:

- Signage might not be very clear what if the signs written in small font, or placed at a height where wheel in array would struggle to see them?
- If the appointment itself is so an upper floor, this presents another physical bases of all so only accessible by stairs.
- The econt sed during the appointment might not take into account seeds of disabled people, such as equipment that requires the service user to stand.
- Corridors and doorways may be narrow.
- The toilets may not be easily accessed by a disabled person.<sup>15</sup>

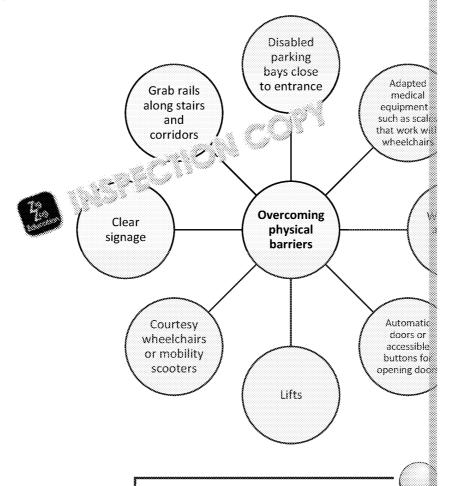


https://www.england.nhs.uk/2023/01/nhs-drive-to-reduce-no-shows-to-help-tackle-long-waits care/#:~:text=Of%20the%20122%20million%20appointments,for%20an%20appointment%20om

https://www.citizensadvice.org.uk/health/discrimination-in-health-and-care-services/health-assituations/disability-discrimination-when-accessing-and-using-health-services/

### Overcoming physical barriers

Adaptations can be made to the environment of the health and social care service spider diagram below for some ways that a building can be made more accessible health issues. These things can help reduce the likelihood that physical barriers wattending a service.



### Case study



Rachel, 25 years old. She recently broke her ankle and is using crutches at the moment. She needs to visit her dentist for a routine check-up, but the clinic is located on the first floor.

Applied activity: Think 5 school/college, and imaging a surgery. What about it might make it has someone with a disability to enter? What is always in place to help disabled people overcome any potential physical barriers?

Applied active study above. It easier for Ris Discuss with a



### Sensory barriers

Sensory refers to the senses – seeing, hearing, touch, smell and taste. Our five seare critical for helping us navigate and make sense of the world around us. But we one (or more) of your senses is impaired? How might this affect your ability to achealth and social care services?

### Visual impairment

Visual impairment means a problem with the visual system – i.e. the eyes and the structures of the brain that deal with sight. You may be born blind, or acquire blindness as a result of illness or injury. There are several conditions that can cause people to become visually impaired; for example

- Cataracts cloudy patches that develop in the residual systems.
- Macular degeneration distortion and sentre of your field of vision. The definite cause is unknowed at the condition is more common with ageing.
- Optic neuritis ່ານ ສາມາລາດ of the optic nerve.

When you la resign to a certain point, you can apply to be 'registered blind' even it you do retain some sight. Some conditions that cause visual impairment can be treated if caught early enough, while others may, unfortunately, continue to deteriorate.

So what are some barriers that a visually impaired person might face when trying to visit a health or social care service?

- Small font on signs, leaflets, or prescriptions
- Communication about appointments received in writing
- Visually impaired people will need to arrange reliable transport perhaps by someone else driving them, by organising specialist service user transport services or via public transport

### Overcoming barriers relating to visual impairment

Many of the barriers faced by visually impaired people centre around the format to service users. Therefore, the following recommendations can be made to ove

- Signs in large, clear font, with symbols to aid understanding
- Communication about appointments in large print and/or Braille, or via a phone call, to avoid issues in reading small-print font

Some consideration should also be given to the physical environment of the service, to make it more accessible for visually impaired people.

### For example:

- Ensure that there is clear, bright in the service. This will aid a
  visually impaired person and their way around.
- Ensure the walk of he ree from trip hazards. This should be the case a but is even more important when considering the needs of visual impaired service users.
- Staff collecting vulnerable service users from waiting areas.

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# Registered blind – you can let your local council know if you have a visual impairment by registering the condition with them. This can help you access certain services and benefits.



### Case study

Martin, 65, has cataracts is hard for him to see clearly vision is blurred, he is not a referral from his GP to whospital and received his a post. Because of his cataralletter and work out exactly go for his appointment.

Applied activity: Read the case study above the trackin. With a partner, can you service could improve the way there are its a try-impaired people information about

Hearing in No. 2

A hearing in the ent means that your hearing system is affected. You may be to anything at an, or you may have hearing loss (and still retain some hearing ability people in the UK who either are deaf or have significant hearing loss — nine million what are the causes? Causes of hearing loss are often grouped into two main sets.

### Sensorineural hearing loss

- Arises from damage to the inner ear or nerves that connect the ear to the brain
- Examples of causes include: stroke, meningitis, genetic conditions, loud noise, smoking

### Conductive hearing loss

- Usually refers to hearing loss that has happened because something is blocking some parts of the ear, and thus is causing an obstruction
- Examples of causes include: excess ear wax, a trapped foreign object in the ear, a growth or tumour, an ear infection that is causing fluid to accumulate

Deaf and hard-of-hearing people have several different strategies for communication. They may lip-read and still continue to speak verbally. They may use a hearing aid to amplify the sounds. Unfortunately, hearing aids can make sounds louder but they do not improve clarity much. Other difficulties in healthcare settings are people talking too fast or talking while looking at a computer screen instead of the service user, overlapping voices, speech muffled by reception screen, music playing in waiting rooms and staff wearing masks. The NHS system for online appointment appears and there is no facility for captioning.

Unfortunately, research to hown that hearing-impaired people are much more outcomes to pop swho do not have a hearing impairment – this is at least parright diagnot treatment. Therefore, it is critical to consider the barriers that face when trying to access health and social care services, and to consider careful.

### Research activity:

Check out the difference between the meanings of Deaf community and dea online that teaches you basic greetings or phrases in British Sign Language.



<sup>&</sup>lt;sup>16</sup> British Deaf Association (2015) - https://bda.org.uk/fast-facts-about-the-deaf-community/

Emond et al. (2015) - https://bmjopen.bmj.com/content/5/1/e006668.full

### Overcoming barriers relating to hearing impairment

Look at the table below. It contains some barriers and possible ways to overcom

Barriers faced by hearing-impaired people, and possible solutions

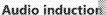
Barrier	Possible s
Waiting room announcements made verbally or over a loudspeaker system	Use of display screens in the waiting announcements.
Telephone contact from health and social care professionals	Contact via a written medium. For ex of an appointment, the information or a text message.
Verbal communication during appointments	Presence of a sign language interpres hearing a decided udio induction located in the second in the



### Did you know?

According to the NHS's 'Accessible Information Standard', services *must* be accessible to people with visual or auditory impairment. For example, services must offer alternative formats for materials (for example, in Braille or large print). 18

Applied activity: Use earplugs, or put in some headphones with the music turned up. Now have two people have a short conversation about you, right in front of you. How much did you understand? How did it feel to not be able to hear them? Discuss with your partners.



signals to amplify wearing hearing help to cut out by If there is a loop, able to see a synt something like the



### Did you kno

The volume 'decibels'. Anythiconsidered increhearing, and is retaking off. Using for an extended causing hearing even realising!



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Zig Zag Education

<sup>18</sup> https://www.england.nhs.uk/publication/accessible-information-standard-specification/

### Social, cultural and psychological barriers

Humans are social beings, and the way we relate to others is important to us. As a result, our interaction with others and the wider society also affects our ability to access health and social care services. Our thoughts and perceptions of health and social care services can act as a barrier to accessing them. All of these elements might even be unconscious, meaning that we do not even realise that these barriers exist.

### Social barriers

Perceptions of what other people think, or indeed, the way other people behave, might make someone less likely to access likely likely to access likely lik

One of the main 'culprits' is what is know ig....... Often, the reasons why something carries ു എട്ട് പ്രാത്ര based on myths and misunderstandings about 1 of what is being stigmatised.

For example nental health diagnosis 'schizophrenia' carries a lot of stigma 🥨 untrue beliefs and assumptions about the nature of schizophrenia, and can lead

Did you know? The Equality Act (2010) can protect many people with a mental health condition from discrimination, as it prevents people being discriminated against on the basis of a long-term disability or a mental or

as openly discussed as some o physical impairment. 19 Feelings of stigma might stop you from seeking help from health and social care services. You might feel that if people find out about you accessing services, it will cause them to judge you or treat you differently. For example, it might be very difficult for someone to request time off work to attend

Unfortunately, the effects of stigma are not limited to other people's perceptions. You can also experience self-stigma, in which you produce judgemental feelings towards yourself or apply negative stereotypes held by the wider population to yourself and your own situation.

counselling appointments due to a fear of repercussions in the workplace.

**Applied activity:** Think of a health and it is not you or someone § misunderstanding  $r\in rc\in \mathbb{R}$  it? What judgements do people mc

know has had – what stigm + d 'es : :::,r,y? What myths or 

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(this is a separate diagnosis). N

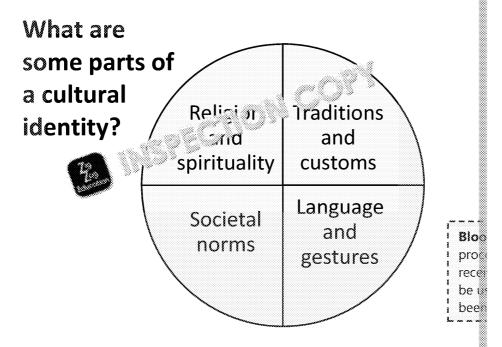
associated with stigma, as the

misunderstanding of mental h

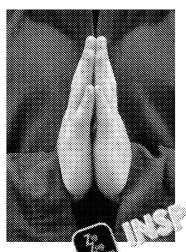
http://www.legislation.gov.uk/ukpga/2010/15/contents

### **Cultural barriers**

The culture that someone belongs to (as well as the culture of the wider society) that person accesses health and social care services. This might be to do with different toom about how you are going to be treated based on your cultural ground things that make us who we are in relation to our community – for instance: our nationality; and common practices such as the celebration of particular holidays.



Religion is an important aspect of culture, and may impact someone's likelihood. Jehovah's Witnesses are people who follow a specific variant of Christianity, and Jehovah's Witnesses cannot accept **blood transfusions**. As a result, they may refunder to observe these beliefs. Consequently, some doctors may be hesitant to calknow they may have to withhold a potentially life-saving blood transfusion to result.



Religious or spiritual beliefs may also affect the perhealth treatment, as psychological symptoms and faith-based issues rather than the presence of a magneticular religious festivals and prayer times might unsuitable for some groups of service users.

Additionally, certain groups often face discrimination by society in J. UK. An example is *travellers*, a group and mg. It feel it is judged by wider society to me common negative ne cep it and stereotypes about it. Therefore, a groups may not feel comfortable accessing services in the mainstream community.

Other cultural practices and *norms* might also affect healthcare delivery. In some cultures, it is only appropriate to have female health professionals conduct procedures or assessments on female service users, especially if the profintimate. This may lead to missed appointments if the professional is a male, or a female doctor is arranged.



### **Psychological barriers**

People's thoughts, knowledge, and perception of health and social care services attending a service.

Firstly – does the person know that a particular health or social care service is available that they will attend or engage with it! Often, people do not seek out sugaware that support exists.

Previous negative experiences have a powerful impact on healthcare behaviour. a hospital where a loved one died, or where they received poor care previously.

Other psychological barriers to attending medical appoin the sare anxiety disonneedles and previous trauma.

Another example of a psychological but the is a fear of losing one's independence that if they make contagging and and social care services for one problem, it involvements are serviced of that person's life. For example, they might be scart they are structured with a health issue, they will have to come in to hospital and their own home.

Applied activity: Should social services be able to force someone to move into a nursing home?

With a partner or your class, discuss whether you think this is right or wrong.

You could also research the circumstances under which decisions can be legally made on behalf of someone else about the most suitable living situation for them.





Joyce is 83 and has around her home. She from getting a walking home adaptations, but her local council about worried that social selonger able to live in have to live in a nursil

This can particularly be a concern for older people. This is due to fears they might homes or residential care in light of news reports about some care homes failing residents. A fear of losing independence can lead to health problems being under as service users might not accurately report an issue.

Avoidance is another psychological barrier that can stop the accessing services. Someone might know that see the modern help is the best course of action – for example, in the lump in their breast. However, they may be very an action wisit a doctor, as having an assessment has the potential accommon their fears. Avoidance is a very effective showing an accessing service of the latest and social outcomes in the long term.

Avoi copii avoi actio

# 



### Overcoming social, cultural and psychological barriers

Although there is a range of potential social, cultural and psychological barriers faservices, many of them are not impossible to overcome. Greater consideration of can go a long way in alleviating particular groups' concerns over accessing health awareness of services and dispelling common myths about needs and services can a look at the table below for some ideas on how these barriers might be overcome.

Potential solutions to social, cultural and psychological barriers

Solution How it can h	
Public awareness campaigns – for example, TV and radio advertisements, billboards	Campaigns can help to dispel myths about a particulal reduce shame and discrimination. They aim to reduce increase knowledge of the service available that can normalise an issue, and help in refuse cultural and social gallavailable for the particular and social gallavailable for the pa
Signposting or referral to more reservices	Light and Social care professionals should refer serving received in the professionals should refer serving received in the processionals also having awareness of other relevants.
Outreach work	Outreach work can be done in the community to educe social care services. This might help with providing infand give communities an opportunity to discuss their services. Some communities may be unaware that be professional they are most comfortable with (for exammale or female doctor) and the chance to attend Wellhave been available for many years. Men's groups and clubs, community groups and faith groups) can help to these options and facilitate discussions about the services.
Individualised service delivery	Services should take into account individual factors we that people are not put off from attending. For example have female staff available to meet particular service and this should be highlighted in the clinic's information of major religious festival Learning from service user feedback and complaints is

**Applied activity:** Can you think of any public health campaigns you have seen recently? What service or condition was it about? What kind of social, cultural or psychological barriers could this campaign be useful in overcoming?

### Case study

Sofia is 25 years old, and has just received her first invitation to attend cervical screening. She is very nervous about the proceduate to its intimate nature sure what it is also.



She is also I that the screening will detect signs of cervical calculations with a she doesn't want to tell her parents that she has been invited, as she is worried they might think she has been promiscuous if any abnormalities are found in her cervical cells. Sofia is also very religious, and will not attend the appointment if a male health professional is present.

**Applied activity:** Can you identify the different barriers faced by Sofia (in the case study above) in attending cervical screening? For each barrier you identify, can you determine whether it is a social, cultural or psychological barrier?

### Cervical

runs a se over the factors the **cer** change by taking they ma only exausers w

Cervix entrance the vage

HPV – common Some of cancer, skin con sometim during risk som



### Lanquage barriers

The UK is a very diverse society, and not everybody has the same level of language they speak English as a second language (or not at all) or because they have a coproduce and understand language. We need to think about how to ensure these accessing health and social care services, and how to improve communication from

### What if English is not someone's first language?

According to the 2021 census, 7.7% of the population of England and Wales replanguage. <sup>20</sup> It is easy to assume that everyone speaks or understands English, at

this is not the case. In our diverse society there are people who need additional assistance to communicate in English another language. Data from the census also fou at at people who cannot speak English or have the ability in English are more likely to suffer from A new general health than people who can speak and is proficiently. Therefore, it is really imported to examine how language barriers affect service ery, and what can be done to improve the situation.

If you do not speak English and all service information is provided only in English, it will be very difficult for you to navigate the sometimes complicated system of accessing and utilising services. For example, the language barrier may have an impact in the following ways:

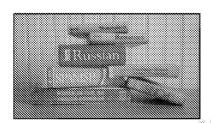
- Uncertainty over appointment details
- Uncertainty over any preparation needed or advice that needs to be followed before (for example, not eating for several hours beforehand)
- Inability to accurately convey symptoms, experiences or needs to a health and social care professional
- Misinterpretation of professional advice, which carries a risk of harm or impact on well-being



chest pains, a sent scanner the post confirmation also enclosed at Aleksander is receively thing involuntamiliar with

Applied activities study above. Vital Aleksander over the state of the

All these barriers hinder assessment, and ultimately receipt, of the correct treatment misdiagnosed or under-diagnosed, and the person may be left with social care new



To overcome a language barrier, use of profession interpretation services is advised. Language Line and relatives may want to help if they do speak information may still at the accurately translate relatives (perhalis in the interpretation of the professional interpretation of the professional interpretation of the professional interpretation of the person, or via telephone, which

Health and call services can reduce language barriers by offering informate explain what appen when admitted to hospital for day surgery) in a range of

Health and well-being groups for speakers of other languages provide opportunities

Longer appointments and use of advocates also help to reduce language barriers secure the services they need.



<sup>20</sup> Office for National Statistics, 2021 census - https://www.ons.gov.uk/peoplepopulationandcom

### What about language impairment?

Some people may have difficulty communicating for reasons other than not speaking English. A range of health conditions can cause problems with either speaking or understanding spoken English, and with reading or writing. The impact of brain injury on language is sometimes called *aphasia*. Look at the diagram below to see which conditions might produce a language impairment of some kind.

Brain damage

Caused by insufficient levels of *dopamine* in the brain

Key symptoms include tremors and movement problems

Some service users have problems producing respectively.

resulting from heavy, long-term alcohol use

Affects different elements of cognition, including language and Caused by interruption to the brain's blood supply

Shaped speech, or ab, ty to speak, is a key symptom of a stroke

> Can cause permanent language damage if it affects left side of brain

resident control contr

AN



S):

**Dopamine** – a neurotransmitter (sends chemical signals through the brain) that is associated with the experience of pleasure and reward.

How can we best help people with language impairment to access services and overcome the barriers of language impairment? Assistive technology is one option; this means technology and devices that can be used to aid listening, understanding and communication. Hearing aids and loops are examples of assistive technology, and were described previously in the 'sensory impairment' section.

Picture boards and touchscreens are further examples of assistive technology, as struggle to produce speech. These can be used to convey simple information such have a drink, meaning that health and social care can be provided more effective. Touchscreens – with their computing capacity – can also be used to produce mosentences. This speech can be spoken out loud by the device, greatly aiding compand health and social care professionals.

As with people affected by hearing loss, sign language interpreters and translators some people with language impairment. This is because they may have learned strategy for communicating, depending on what caused them to lose the ability language is used by some children and adults with learning disabilities as it is simple Crucially, building up an understanding of each service user as an individual and best way to communicate with them are a core part of or ming language-relations.

As for speakers of other languages, providing in the speakers of other languages, providing in the speakers and use barriers for individuals who have language as speech impairments.

Staff training and awarence and speech impairments is crucial if these than and social care tire and staff are more likely to be proactive in suggesting are strategies when the experience of receiving health and social care services.

Continuing professional development courses on communication, input into staff language therapists and service users who are 'experts by experience' all help to communication between services and service users who have language or speech

Applied activity: Smartphones are becoming increasingly popular in all areas of &

With a partner, try to design a smartphone application that could be useful for peoto produce speech verbally. What kind of features could it have? What would it loo

21 https://www.nhs.uk/conditions/stroke/



### Geographical barriers

The location of a service, and the location of the person wanting to access it, might some people are lucky to live close to or within easy access of all the services that travelling to one or more services might entail an enormous degree of effort. This someone from attending services, and, therefore, acts a barrier.

### Distance of service provider

The service someone needs to access may be a long distance from where they live with common primary care services such as general practitioners, as even small surgery. However, for appointments at hospital clinics or more specialised second many people will need to travel to attend.



For example pecialised inpatient mental health pecial meds may not be located anywhere necessary as a barrier to maximising the therapeutic valvery hard for friends and relatives to visit the sepsychological well-being to deteriorate. In the valoved ones enables abusive practices in some method that the separation of the process of the period of the

It may not be easy for someone to travel by car – petrol and parking charges are not comfortably affordable to those on a low income. If there is a major accident on the route, there is the possibility of getting stuck in traffic and missing the appointment. Lastly, a service user may not be allowed to drive themselves, depending on the procedure they are having and whether they are being put under *anaesthetic*.

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### Issues with transport links

If someone doesn't have a car (or anyone willing to drive them), then they may need to get public transport. This can work well if the area is well supplied with buses and trains that have frequent and reliable schedules. However, what would someone do if there is only one bus every few hours, or it doesn't turn up?

Depending on how rural the location is in which the person lives, or how far away the service is, the journey is likely to have more than one component. Imagine you are not feeling very well — would you want to take a train and two buses to get to the clinic?

Public transport is too stressful for some individuals ((a) an ple, due to autism or mental health issues) and the cost a take may make hospital appointments inaccessible.





<sup>22</sup> https://www.challengingbehaviour.org.uk/news/whorlton-hall-trial-concludes/

# Overcoming geographical barriers

Service user transport services might be available in some areas, which can help appointment or treatment. These are services organised by the hospital that can home and take them directly to their appointment. They can also help people me departments. However, there are strict eligibility criteria for this, <sup>23</sup> including the

- People with mobility problems that would struggle to attend their appointments assistance are eligible.
- People diagnosed with a condition that means they require specialist medicipourney are eligible.
- If a child is being transported, their parent/guardian is also eligible.

You may also be eligible to claim refunds for the expension incorred travelling to need to pay for it yourself up front. People value a paying ple include those who reclaim income, but this must be proved and of the receive a refund.

Home visits by of the property of the property

Local community clinics bring care closer to the community, and, increasingly, specing a rheumatologist) are being made available locally in addition to podiatry community midwife clinics and many others.

## What about technology?

A major current focus of healthcare research is the ways that technology can be used in service delivery.

**Telehealth** services, part remotely, pa

Technology has the potential not only to overcome geographical barriers, but also delivery. Care and support can also be provided at times that are more convenient medical appointments increased during the COVID-19 pandemic and have remains service users, particularly those who are younger and have easy access to the respecially helpful for busy younger adults with uncomplicated medical needs.

However, the reduction in face-to-face appointments has increased some inequal care services. Individuals who do not have Internet access or the knowledge or cathose who perceive online communication as relatively cold and impersonal, risk towards telehealth. Some health professionals are concerned about becoming dout physical examinations) and that important information gathered in an in-perduring online or telephone appointments. This is particularly likely if the service a quickly worsening and potentially fatal illness such as sepsis. Children (whose mapidly) and some elderly people with multiple illnesses are particularly at risk. Opublished in *British Medical Journal Quality & Safety for the strength of the service with a sepsis and some selections.* The second with errors by administration between 2020 and 2023.<sup>24</sup>







NHS (2017) – https://www.nhs.uk/common-health-questions/nhs-services-and-treatments/how-d

<sup>&</sup>lt;sup>24</sup> https://www.telegraph.co.uk/news/2023/11/29/patients-at-risk-from-virtual-gp-appointment

Have a look at the diagram below for some ideas on the ways in which technolog geographical barriers to service provision. It is worth noting that these technolog implemented in all health and social care services, as there is a long process involved and approaches to service delivery.

Phone calls for consultations, updates and reviews How could we use technology in service delivery? Videoconfe Smartphone apps for can retain logging symptoms, non-ve reading relevant communic resources and and can be suggesting coping show phy strategies symptom video

# Case study

Ruth, 45, lives in a small village in Cumbria. She recently suffered a heart attack been referred to a dietician by the cardiology team at the hospital.

She does not drive, and needs to take two buses to attend the dietician's clinic in visited the clinic for her first appointment, but the journey takes a long time and She asks her dietician if there are any other ways she could speak to her for a suppointment to check progress towards her new diet plan.

Ruth's dietician agrees to have telephone consultations with her instead. This help dietician's service and meet her health needs of an improved diet and lowered in

Applied activity: Can you identify the geographical barriers faced by Ruth is

Look at the diagram above Ruth's case study. He \_\_\_\_\_la\_rideoconferencing & be useful in meeting her needs?





# Intellectual barriers

There may also be barriers to health and social care access that are related to the and the extent to which a range of intellectual capabilities are taken into account when delivering health and social care services.

# What are learning difficulties and disabilities?

As discussed in **Section A1**, *learning disabilities* come in many different forms. Each person with a learning disability is an individual who has their own needs and personal preferences. A learning disability is lifelong, but, depending on the circumstances, a person may be able to learn coping strategies to overcome the difficulties and function well in y.

Some learning disabilities may cause the permitted to have difficulties with specific tasks, such as with readily confumbers. See the activity below — there are some and a mearning difficulties named that you might recognize

Learn
term
capal
activi
in cap
affect
readi
profou
to su

**Applied activity:** Can you match the learning difficulty name to its description? Research the terms if you need to.

Dyscalculia

Dyslexia

Dyspraxia

Difficulties with motor skills, including coordination and movement

Difficulties with mathematical calculations, including numbers and mathematical symbols

Difficulties with literacy, including reading and writing



Sadly, people with learning disabilities face a huge degree of *health inequality* co A 2013 report by the University of Bristol looked at the early deaths of people were searchers found that men with learning disabilities died on average 13 years eavers earlier, than the general population. The researchers concluded there were responsible for this, including delays or issues in receiving treatment, incorrect denough to help people access services. Even worse, discrimination by some healt to be a factor in the premature deaths of some individuals with learning disability. Death by indifference' progress report (2012), 26 and discrimination was marked.

You can see clearly why it is so important to think about the issues faced by peoptrying to access services. Barriers to accessing services by more learning described by the services by the

The provision of information in writing; for example, leaflets. This is very difficult for with dyslowed impossible for someone with no verbal communication skills.

Someone with learning clipped end of the learning clipped end of the learning clipped end of the learning concerns or questions while consenting to a medical procedure.

learning disabilities might have difficulties remembering appointments and organising transport for the right date and time.

Some peo strugs communic sympton example, the of pain particularly the perso



University of Bristol (2013) – Confidential inquiry into premature deaths of people with learning http://www.bristol.ac.uk/cipold/reports/

<sup>&</sup>lt;sup>26</sup> https://www.mencap.org.uk/sites/default/files/2016-08/Death%20by%20Indifference%20-%2

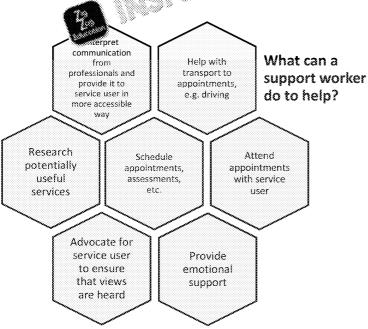
<sup>&</sup>lt;sup>27</sup> https://www.thequardian.com/world/2021/feb/13/new-do-not-resuscitate-orders-imposed-on-

All of these could impact a person with learning disabilities by increasing the likely meeting their needs. For instance, the diagnosis of a potentially serious health purcommon for people with learning disabilities to also have physical disabilities (for in both). Therefore, a person with learning disabilities may face multiple, intersely as the physical barriers outlined at the beginning of this section will impact them

# Overcoming barriers to service access for people with learning

Clearly, steps needs to be taken that help people with learning disabilities access health and social care needs are being met.

Firstly, the person might have a named health or social care professional who can through the process of service involvement. Some individes a have an advocate Advice advocacy service – who can speak up for the month personal support worker, who can help them in the pushways – the diagram below his study box below also contains a rescription of a support worker's role in helping to access services.



**Applied activity:** Read the case study about Andy and Carl.

Can you identify a few things that Andy did to support Carl through the process of attending hospital. Holdid Andy help Carl overcome some 's (1). (1) service access?



Andy, 28, is a subservice for your disabilities. He shas a moderate some impact on subservices.

Carl needs to all routine check-up letter in the post and shows it to well, he is able language that he explains the and when it is selections.

Andy drives Caswith him throughs emotional supps during the apps anxious in a hoss

During the drive Carl asks Andy will happen next Andy explains to Carl things that doctor said in a accessible way, reassures him the touch if there ass



Other ways to help people with learning disabilities overcome barriers to service.

Providing **information in easy-read or accessible format**, such as large print or published by Beyond Words), and using communication cards, while avoiding profor example, what happens at a hospital or dentist appointment. Since 2017, the has required health and social care services to provide information in an accessibilities, including learning disabilities and sensory disabilities. <sup>28</sup> Research in 20 of charities indicates that people may not always receive the communication supports.

Many NHS Trusts actively promote the use of *patient passports*, especially for individuals with learning disabilities, autism or other complex needs. These patient passports are comprehensive documents that go beyond basic medical information. The condete essential details about the individual's communication are as, potential stress triggers, and strategies for the line of the passport.

A patient to hospits which sum medical informats Makaton

These documents are particles in the althcare providers have the necessary insights to reduce potential ressors during medical encounters. Patient passports facilitate understandia and the provision of tailored care.

In a similar vein, *All About Me documents* are often used in educational and healthcare settings. They serve a similar purpose by offering a more holistic view of an individual's needs, preferences and unique characteristics. These documents are highly individualised, allowing individuals, caregivers and healthcare professionals to collaboratively plan and implement care and support strategies that align with the patient's specific requirements.

All About patient patient patient the about the (e.g. becomeeds, and individual)

The combination of patient passports and All About Me documents represents a overall healthcare experience for individuals with complex needs. They promote misunderstandings, and enhance the quality of care by ensuring that healthcare and can adapt their approach to suit the individual's unique circumstances.





**Learning disability nurses** (LDNs) can help liaise between the service user, their fair staff. They play a key role in making sure that everyone were and seach other. The individual's needs and help service users and their families learn how to take part

Hospital appointments and medic in processors can be made more manageable for individual valuationing disabilities. Ways to achieve this processor to quiet clinics and waiting areas, and longer aments. Enabling a loved one to accompany the individual (e.g. into the anaesthetic room before an operation) can also help the person to feel calm and reassured.

Makaton and the wused as puundersta

Use of Makaton and sign language, obtaining an interpreter if necessary

Making use of multimedia and technology in providing information. A video with and can appeal to different learning styles.



<sup>28</sup> NHS England - https://www.england.nhs.uk/wp-content/uploads/2017/10/accessible-info-star

<sup>29</sup> NHS England - https://www.disabilityrightsuk.org/news/dr-uk-calls-nhs-england-publish-review

# **Financial barriers**

Depending on someone's income and the cost of the service they need to access which prevent them from accessing services.

# Charging for services

Not all health and social care services are free for all users. Some primary care se on the type of treatment received. For example, an optometrist will charge most Additionally, many people need to pay a charge to receive prescriptions or to visit diagram below for some details on fee-paying services.



# Prescription

- **mլ՝ Համclude:** Under 16 or 60 years old
- 5–18 but in education
- People with some medical conditions or physical disabilities, hospital inpatients

Contraception - methods to prevent pregnancy occurring. There is a wide range of methods freely

implant that releases hormones).

Note – costs in the above diagram were accurate in 2023. 30 31

available, including barrier methods (such as condoms), medication (e.g. the contraceptive pill) and devices (e.g. an

The reasoning behind charging for some services might be clear to you

having read the 'resource barriers' section above. Health and social care services are expensive to run, and some contributions from service users

However, these costs can act as a barrier to some people, who may not be able to afford them or may not be aware that they are eligible to



Different bands of treat

- **Band 1** £25.80 (e
- Band 2 £70.70 (e)
- Band 3 £306.80 (



vou:

# Rese

som mighmuci and . trea:

# Cost of transport

receive some paid services for free.

As noted in the 'geographical barriers' scale the costs involved in travelling to a near nor social care service can as a summoant barrier for ecoses service access. The costs of run ar (including buying fuel) and paying for parking are too high for many people. Depending on the distance and location of service, public transport may also not be an affordable option.

can help to offset at least some of these costs.

Applied activity: Imagine you. for an appointment - however, is a 20-mile drive away. In your 40p per mile. You will probably two hours, which will cost £3 in

Calculate the approximate cost including the trip home!



Department of Health and Social Care (2023) - https://media.nhsbsa.nhs.uk/news/nhs-prescrip april#:~:text=From%201%20April%202023%2C%20the,pay%20in%2010%20monthly%20instalr

NHS (2023) - https://www.nhsbsa.nhs.uk/sites/default/files/2023-05/NHS%20England%20dent



# Loss of income while accessing services

To attend a health and social care service, time off work employers require that time taken off for appointments dentist) is taken as holiday or as unpaid leave. Employed you for the time you spend going to appointments.

It is possible to see how someone can suffer a substantial loss of income over an exto attend multiple appointments. This can discourage people from engaging with homologies are up any proportion of their income. Additionally being repercussions at work for taking time off — for example, being less likely to be

**Statutory Sick Pay (SSP)** – you might be eligible to leave a £109.40 per week (for up to 28 weeks) from the comment if you are off sick from work for form and any anys in a row. You need to meet the government of an 'employee', and must be earning a state of any any and the per week. Note – figures correct as of 202.



emi off dis cire to

# **Overcoming financial barriers**

The NHS Healthcare Travel Costs Scheme (HTCS) can help eligible people (for exabenefits, such as Universal Credit) to claim back reasonable travel expenses that travelling to hospital for an appointment or treatment.

Community transport schemes may be available locally to provide free transport

Sick pay is something that can offset the cost of involvement with health services. Some employers offer their own sick pay package, but the government also offer can help reduce the impact on income of sickness where your employer does not however, SSP only covers absences of four days or longer, and is not provided who needed (for example, to attend an appointment).

The **NHS Low Income Scheme** can help eligible service users with the costs of prescriptions, travel to appointments, dental treatment, and optical care.

NHS exemption certificates reduce the cost of prescriptions for those people who have multiple repeat medications. The cost is £111.60 for one year (2023).

NH tho th

Charitable funds and organisations can also offer assistance for people suffering health and social care issues. Various charitable funds exist, and often cater to a example, people working in a particular industry). You usually need to apply for the circumstances, and finding the right one for your needs of the entail some time some times.





# A3 checking my understanding

- Identify three physical barriers that someone in a wheelchair might access a health and social care service.
- 2. Suggest three ways that services can be more accessible to people
- 3. Explain the meaning of the term 'stigma', and how it might impact o
- 4. Identify **two** ways that language can act as a barrier to accessing sea **one** way to overcome this barrier.
- 5. Using an example for each, explain **two** wave in a peographical base from accessing services.
- 6. Describe what is meant by 1 a ming disability'.
- 7. Suggesting the cost of health and social case they contain the cost of health and social case they contain the cost of health and social case they can be contained by the cost of health and social case they can be contained by the cost of health and cost o
- Name two health services that most people have to pay a contribution use them.
- 9. Read the case study below:

Derek is 42, and needs to go to hospital to have an X-ray done on his which is a long way from the hospital (nearly 20 miles), and does not need to take a bus, a train, and then a taxi from the train station to the income, and is worried about how to pay for this. He also sometimes as he has a condition that causes his legs to swell due to fluid build-u day, he is worried about getting around the hospital, as he cannot we be also nervous about the results of the X-ray, as his father died ago. Because of all of these factors, he is not sure whether he will attention

- a) Explain the barriers to accessing the service faced by Derek
- b) Assess the strategies that could be put in place to overcome to by Derek.





# Learning Outcome B: Understand the skills, attributes and va

# B1: Skills and attributes in health a

Specific skills and attributes form the foundation of expert and caring health and explores those skills and attributes that are particularly important in the health at

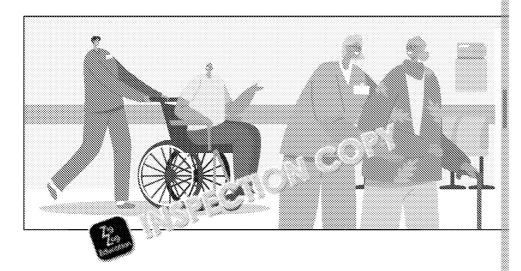
# Skills

Skills for Care is a UK-based organisation which is responsible for planning and developing the adult social care sector. In 2016, English and employability skills were identified as core skills for health and social care in the UK by Skills for Care.<sup>32</sup>

- English skills: required for Sar spoken and written communication. This may include leading dical terminology and names of medicines. It is important society is storic users' safety and well-being that people working in head accurate appropriate in their use of language.
- Number skills: essential when dealing with a range of tasks in health and so correct dose of medication to a service user.
- Digital skills: needed for accessing, understanding and adding to digital recommendation
- Employability skills: include specific skills such as writing a CV, and more get qualifications and experience needed to apply successfully for health and so

More specific skills needed for health and social care work are:

- Problem-solving care workers must make quick, effective decisions to addinate innovative solutions.
- Observation involves monitoring physical and mental changes, ensuring e
- Dealing with difficult situations care professionals need to handle emotion
  empathy and composure.
- Organisation essential for managing schedules and resources, and for maken efficient and high-quality care.





<sup>32</sup> https://www.skillsforcare.org.uk/resources/documents/Developing-your-workforce/Care-topic care.pdf

There are some examples in the table below of the ways that health and social c

	Example 1	Example 2
	Shakira, a domiciliary care	Due to staff sickness, there are
	worker, finds that service user	too few registered nurses due
	Angela has an urgent	on the next shift on a hospital
	prescription for antibiotics.	ward. There are no bank or
Problem-	The local pharmacy is shut.	agency nurses available. A
solving	Shakira looks online to find the	senior nurse arranges for an
	nearest open pharmacy and	additional nurse from a ward
	takes the prescription there	which is better staffed.
	for Angela.	
	Henry has had a maior	ranira is a mental health
	operation. Th್ r ಖಾರ್ತ ಬರ್ಬಾಗಿ	support worker. She observes
	him fc ា ខេត្ត បញ្ជាព្រៃations.	that service user Mandy is
6	The parce that he suddenly	more withdrawn today.
	ecomes pale and breathless,	Mandy appears to have lost
Observation	and his blood pressure drops.	weight and does not maintain
	Further checks confirm he has	eye contact. Amira discusses
	internal bleeding, but as it is	her observations with Mandy
	identified promptly, he	and a senior member of staff
	recovers well after	and Mandy is offered
	further treatment.	more support.
	Winston is hearing voices	Sally, a care home resident,
	which are telling him that he	has died, and her family have
	can fly. He climbs on to the	arrived to see her body. The
	roof of a building and a	nurse in charge asks Chelsea, a
Dealing with	passer-by calls the ambulance	care assistant who knows the
difficult	service. Charlie, a paramedic,	family well, to help support
situations	persuades Winston to go by	them. Together they give their
	ambulance to a place	condolences, offer
	of safety.	refreshments, and give the
		family support and time with
		their loved one.
	Lynn is a district nurse and has	Peter is a surgeon performing
	a list of people to visit, many	major operations. He has an
	needing end-of-life care in	operating list for the day, but
	their own homes. She receives	a multiple car collision on the
Organisation	a call to say that one service	motorway leads to a lack of
	user is in a lot of pain and	intensi ju re beds being
	distress, so Lynn rearranges	avaraie. He must cancel one
	her visits to see that re so	përson's operation that day.
	soon as possitie	

Having to c

ા ા ું ાલ્યાર્પ situations is common in health and social care. Cons

# Case study

Paul is a care assistant at a care home, helping resident Arthur to get washed and & Arthur's cancer is advanced, and doctors do not think he will live for many more me Arthur does not know how serious his condition is yet. Arthur looks at his own very that and says to Paul, 'I look like I'm not long for this world'.

Applied activity: Wh What should Paul say

Answer overleaf.



Answer to applied activity: A suitable response would be to first acknowledge Are to get a senior person to talk to Arthur about this. Paul might say, 'Is that what you is in charge today. When we've got you washed and dressed, how about I ask her that?' It would then be up to Arthur whether he wanted to discuss it further or no conversation to the person in charge, and Arthur's concerns should be document.

Sister Jenny's role as a senior member of staff is to deal as best she can with a conconsider how much Arthur seems to want to know about his illness, what medical his family's opinions too. She will think about the consequences of giving or with a dilemma this poses. Arthur's right to know about his condition may conflict with a devastated by the news and would be better off not being told. Sister Jenny will relevant laws and excellent communication skills to deal with this difficult situation.

# **Attributes**

Four essential attributes of the social care professions at

Attributes are speand can be describe

Empathy – ility to be able to imagine yourself in someone else's situation and how that might feel. Empathy is needed to understand the perspectives of service users and colleagues in health and social care. However, empathy must be balanced with the resilience to cope with frequent exposure to the suffering of others, or to recognise and seek support if becoming overwhelmed. This combination of empathy and resilience enables health and social care professionals to be understanding and to continue to function professionally in emotionally charged situations.

**Trustworthiness** – this attribute is the foundation of health and social care work. Service users trust health and social care professionals with their most sensitive and private information, their bodies, their minds, and the most vulnerable times of their lives. Some aspects of trustworthiness are also legal requirements, such as being trusted to maintain confidentiality.

Patience – this attributusers of all ages and is. This may be time to exindicating their choice (for example, learning to practise independences in colleagues, who will he priorities and perspect

Honesty – for the safe and colleagues, being ongoing responsibility to be honest about limexperience, job role as honesty in reporting as particularly if an error

## Case study

Chloe is a healthcare assistant in a care home for people who have dementia. She resident Agnes to undress for a shower, but Agnes has become agitated and shout. As Agnes has severe memory problems, Chloe understand Agnes may not understand, so undress her. Chloe tries coak as smally and pointing to the shounderstand, but Agnes remains very a late, and each care home is short staffed and the Chloe, so she returns Agnes to a fee from and reports and records that she has be will try again later in the second

Applied activity: What attributes has Chloe demonstrated in the way she has l

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Zig Zag Education

# **B1** checking my understanding

- 1. List the core skills for health and social care identified by the organ
- 2. Explain what is meant by problem-solving in health and social care
- 3. Read the case study below:

Ahmed, a nurse, notices that an elderly service user's voice has by leaning over to one side in their chair.

State which skill Ahmed has used in this situation

- 4. Suggest three examples of deal: the inficult situations in health
- 5. Read the case study 200

Lee the do saced paramedic attending the most life-threatening road es. At the beginning of every shift, he checks that the esworking and that all the medicines are in the correct places in his will carry in his rapid response car.

Explain why Lee's attention to detail and organisation are important

- 6. Explain the concept of attributes, providing at least one example.
- 7. Discuss the importance of empathy in health and social care work.
- 8. There is an old saying, 'patience is a virtue'.

Explain what this means and how it relates to health and social care

- 9. State what is meant by trustworthiness.
- 10. Discuss the importance of honesty for the safety and well-being of social care.



# B2: Values in health and soc

Values are an individual's moral code; in other words, the principles they stand

Values in health and social care aim to ensure individuals are provided with top-

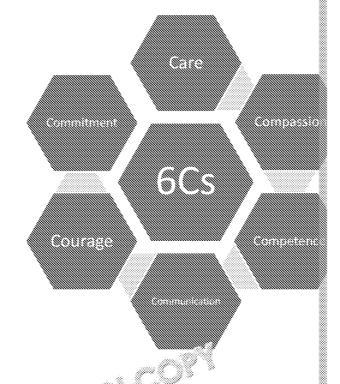
The values which are most often associated with current health and social care places were introduced by the UK government's Department of Health 2012–2016 Nursing, Midwifery and Care Staff – Our Vision and Strategy'.<sup>33</sup>

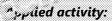
This strategy arose from multiple reports of shocking with ws of care, including:

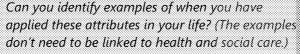
- Winterbourne View 2011<sup>34</sup>
- Francis Report 2013 (on the Michael frame NHS Foundation Trust public)

The Compassion in Company tracegy considered what had gone wrong in these so be promoted as 3-and social care to prevent future failings. The strategy also values in practice of improve care.

The 6Cs are shown in the diagram below:











<sup>33</sup> https://www.england.nhs.uk/wp-content/uploads/2012/12/compassion-in-practice.pdf

<sup>34</sup> https://assets.publishing.service.gov.uk/media/5a750e7740f0b6397f35d52d/4-page-summary

<sup>35</sup> https://www.gov.uk/government/publications/report-of-the-mid-staffordshire-nhs-foundation

The table below explains what we mean by the 6Cs in more detail.

Personal		000000000000000000000000000000000000000
attribute	Definition	Example
Care	In the context of health and social care, the word 'care' refers to supporting the individual with their needs and helping them to be as independent as possible. Care is the foundation of this sort of work.	Sonia is a care wo Despite this, whe Maisie, seems su time to ask Maisi example of <b>care</b> .
Compassion	Compassion is 'intelligent kindness' and is how care is given based on empathy respect and dignity.	Dale is a social we assessment for the becomes distress sympathy and give their feelings. Da
Competen	n petence means having the knowledge, understanding, skill and authority to carry out a caring role.	Ashra is a nurse we notices that a pat today has a rising pressure. Ashra ke indicate internal hidden from view urgent assessmendemonstrating co
Commitment	Commitment means a strong belief in the importance of care which will drive professionals to take action to provide good-quality services.	Andy has taken of which has been as improvement by hard to correct fail demonstrating co
Courage	Courage is showing the bravery to do the right thing, even if there may be negative personal consequences. It also relates to being willing to try new ways of working.	Ali is very concer day centre. He ha managers, who h decides to report body, risking his j for clients. Ali is d
Communication	Communication relates to both receiving information from others (such as by listening, observing body language) and giving information (verbally, non-verbally, written).  Communication is key to building positive caring relationships and team working. Some forms of communication (such as accurate written reconstructions) are required by the	Relatives complated home, that some been lost and the concerns, apologinvestigates what to the relatives a demonstrating co

It can be quite a shock for a law entering these professions that these positive health and seed for a national strategy, we need to reflect on some of the rein some case snockingly abusive practices such as those demonstrated by some

- Mid Staffordshire hospitals (as described in the Francis Report 2013)
- Winterbourne View 2011, Whorlton Hall 2019 and the Edenfield Centre 202
   Panorama programme)

Applied activity: Over to our reporter outside the Stafford Hospital..

Imagine you are a television news reporter waiting to outline the main findings of the Mid Staffordshire NHS hospital trust. You have two minutes to talk to viewers on a second with the main findings.

zzed.uk/12505-NHS-history to decide how you would summarise the findings.

# 



# Care

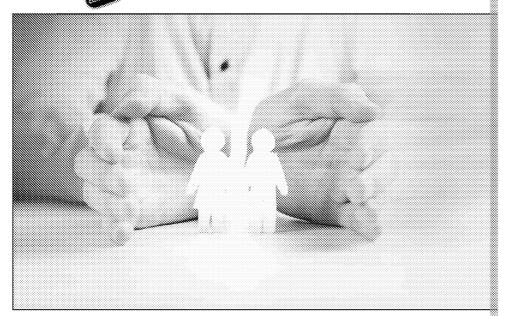
The care given to service users should be correct for each individual and consiste

Care is not only about being kind. The 'care' part of the 6Cs also requires health strong enough to guide service users to push themselves when necessary (such exercises) or to make changes they find difficult to benefit their health and well-

Care in health and social care work also means staying with the service user thromay be tempted to stay away. Examples are when service users become agitate.

Sometimes health and social care workers find themselves is nonstrating care by This may simply be through working long shifts, in the insociable hours and may be through working in physically challenged in umstances, e.g. a paramed road traffic collision victim while the collision victim w

Health and scale services ionals are frequently required to show care to their mentoring only staff, motivating the team or supporting colleagues who



# Research activity:

Ellie is 14 and attends an appointment with her family doctor (GP) alone. She asks for pills, but the doctor says, 'You are too young to have sex legally, so it would be unet contraceptive pill to you.' He dismisses her request without discussion. Read the advice contraception to people under 16 here:

zzed.uk/12505-under16s

Discuss with a partner to share the syn and show the issue should be / should have be

It is important unit which ethical considerations and complexities that health providing considerations are care. A 15-ye wild may tell a nurse that they are being targeted by a gang but in parents to know. The nurse then has the ethical dilemma of respecting the teenaresponsible for their safety. Should the nurse inform the parents or not?

Care can be delivered in challenging situations, highlighting the importance of emdecision-making in providing quality healthcare.

Sometimes a health or social care professional's ethics may conflict with the ethi



# Compassion

Compassion includes empathy, respect and dignity. There will be more on prom

Health and social care professionals show compassion in many ways. A midwife whalbour may stay on duty to provide continuity of care until the baby is born, long af

Compassion enables health and social care staff to understand that challenging be needs and to work hard to understand the meaning behind the behaviour and peclient with learning disabilities and autism may not be able to express that the rostart to rock and scream. Compassionate staff will recognise this as the client's owill seek out the cause of the distress and a solution. They go try a range of streamoving the person to a quieter area or a peaceful so go from to see whether

Health and social care profession converse population, and having compand work with service usage of all backgrounds.

At times, he described social care staff will be required to support individuals who who are abuse to staff. Having compassion helps staff to remain professional in

# Competence

Competence requires the skills and knowledge to deliver effective care, and the and social care research.

The public rely on health and social care professionals to be competent to delive high-quality care. To gain competence, health and social care professionals required education, training and experience. In order to prove their competence they multipass assessments and often specialised tests of competency to be authorised to carry out specific tasks or roles. A *phlebotomist*, for example, must demonstrate competence not only in taking blood samples but in caring for the service users the serve, using the correct equipment and completing the correct documentation.

Health and social care staff often use equipment or medicines which are hazardo. Competence is therefore essential for the health, safety and well-being of the pu

A radiographer, for example, must know the correct settings of the X-ray machine correctly and how to care for them when they undergo X-rays and other imaging

In social care, competence is required in a range of areas of practice, such as admicare home to being a competent manager able to comply with legal requirements

# Did you know?

Competence in the social care goes beyond initial training and que health of the social care goes beyond initial training and que health of the social care to lifelong learning and staying current with provide the staying current with provide the social care to service users.



# Communication

Being able to communicate effectively with others (service users, their family carers, and colleagues) is extremely important; almost everything we do involves communication, especially when working in the health and social care sector.

Ens with

Ineffective communication is reported to be a significant contributing factor in medical errors and inadvertent service user harm. Not communicating effectively can cause physical, emotional, intellectual and social why there is a clear emphasis on communication in these sectors. Effective communication and understood by the recipient.



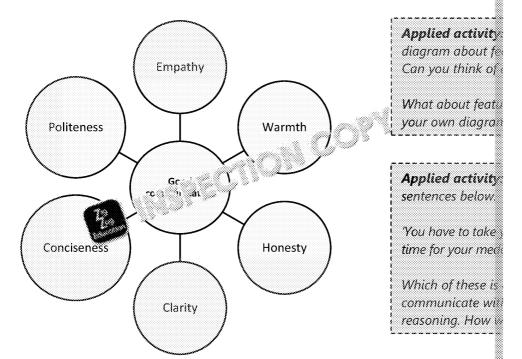
In care settings \* ki. an **empathic** and warm approach to go into hospital and understanding of your situation, how would it compassionate is a much more effective approach care and support to service users.

Effective communication is also about using the preferred method of communication many different methods of communication — people do not only use spoken languand Makaton, or have a first language that is not English. These approaches to contain the earlier in A2 — go back and review these if you need to.

Lastly, the importance of good communication between service providers and control of the following:

- It ensures that work gets done and is not duplicated.
- More coordinated care can be given, as different team members can carry of can be reassuring for service users, and ensures that different team members
- Safeguarding (see section below for full discussion on safeguarding) effection helps to keep service users and staff safe.

Look at the diagram below for some characteristics of good communication.





# Courage

Courage involves doing the right thing and speaking up when concerns arise. The in health and social care include:

- Inadequate staffing
- Inadequate equipment
- Feeling underqualified or inexperienced to perform designated duties
- Believing that some team members are not 'pulling their weight'
- Witnessing or suspecting poor care or abuse of a service user
- Disagreements about treatment or care
- Aggressive behaviour from service users, relatives or others
- Overexposure to distressing sights, sounds, smells as a uations
- Exhaustion and burnout (becoming overwheare with other people's problem

Every workplace should have a mice a move to report concerns. A more senior usually the first person and a concerns with. If the concerns are not dealt will escalated with the sumsation, and if all else fails to other appropriate author Commission cample, oversees the quality of care in health settings, and conthe organisation does not respond adequately.

Reporting concerns at higher levels is sometimes referred to as whistle-blowing. make the whistle-blower unpopular with colleagues and, in extreme cases, can lea newspaper article in 2020:

'More than 100 medics have contacted WhistleblowersUK to report worries about the coronavirus crisis, the organisation has said. And many of those have reported with disciplinary action — or even job losses — by NHS trust managers if they raise.

The news article highlights the importance of whistle-blowing as a means to address of personal protective equipment (PPE) during the COVID-19 pandemic. It emphasilevels is essential for ensuring public safety. However, it also underscores the potential state of disciplinary action, or even individuals from coming forward. This raises ethical and legal questions about the available for those who report concerns, making it a complex issue that demands

Often, however, whistle-blowing has a positive effect, leading to improved care

Courage in health and social care sometimes involves pushing oneself to do the difficult circumstances. Consider the example in the case study below.

# C. siudy

Wendy, an ambulance dispatcher, receives ? call from a mother whose baby he needs to dispatch the ambulance of the project address as a grade 1 priority and in how to perform infant to the properties of the paramedics arrive. Wendy feels overwhere entails in a signal state of the properties of the properties of the project of the proj

Wendy behaves with courage by overriding her fear and focusing on doing the best baby. Wendy follows her on-screen instructions and speaks kindly but firmly to the to perform infant chest compressions. Wendy continues to encourage the mother, tell until the ambulance crew take over. Her supervisor congratulates Wendy on her wobreak with a sympathetic colleague. Wendy is feeling exhausted and a little tearful baby survived and Wendy is proud of playing her part in saving a life.

# 



<sup>36</sup> https://www.independent.co.uk/news/uk/home-news/coronavirus-uk-nhs-ppe-whistleblowers

Applied activity: Read the case study (previous page) and make notes on:

- How the supervisor will have helped Wendy to be courageous
- How Wendy will have helped the mother to be courageous and be able to perform arrived to take over

# Commitment

Health and social care professionals need commitment to improve care and the

Commitment helps drive forward improvements to services, and encourages inn

If health and social care workers are committed to improving Services then they service users, families and colleagues about the position of services and indicate criticism as an opportunity to learn how this large practice, rather than be

Increasingly, the perspective particle users is being incorporated into the education of the school. Sheffice University and education of the school school reports that:

'During these sessions, patients speak to students about their condition and their their journey through the health service and how their illness has affected them emotionally'.<sup>37</sup>

Service users as 'experts by experience' therefore provide valuable insights to st with health conditions and disabilities and of using health and social care services

Health and social care services are more likely to survey service users' opinions to insights to inform future ways of working.

Senior health and social care staff are increasingly involved in research into impr

Evidence-based approaches in health and social care use research findings to guidence-based process in the drug transparation acid to prevent life-threatening be effectiveness in treating casualties in war zones. Evidence-based practice like this providing the best available treatment and care.





<sup>37</sup> https://www.sheffield.ac.uk/smph/patients-educators

# **B2** checking my understanding

- Outline what is meant by the 6Cs in health and social care. 1.
- 2. Describe two examples of health and social care practice which dem
- 3. Read the case study below:

Eric is 90 years old and has advanced cancer. He is being cared for by his family, paid carers, and a district nurse.

Discuss how a compassionate approach by health and social care s during this challenging time.

4. Read the case study below:

Sergei and Mia are modies who are attending an emergency has collapsed

it is vital that the paramedics work in a way which den assess and treat Marion.

- 5. Explain the support that can be put in place in health and social car communication with service users who have impaired hearing.
- 6. State three ways that health and social care professionals can help learning disabilities understands their options for treatment.
- Define the terms 'courage' and 'whistle-blower'.
- 8. Explain why speaking up about concerns in health and social care courage.
- Discuss why commitment is included as one of the 6Cs in health an
- 10. Read the case study below:

Josie has taken over as the new manager of a care home which was improvement' at the last inspection by the Care Quality Commissi residents, relatives and staff to discuss the strengths and weakness then formulates a plan to improve care and work towards a 'good'

Explain how Josie's actions demonstrate commitment to improving



# 



# B3: The obstacles individuals requiring

An obstacle is something personal to an individual that blocks a person moving for prevented or made difficult.

In Section A3, Barriers to accessing services, the following barriers to accessing have noted:

Physical barriers	Sensory barriers	Social, cultural and psychol ಕ್ರೀಡಿ rie	Language barriers	
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There is some overlan to well marriers and obstacles, which will be explored the

Emotion Time constraints	Availability of resources	Unachievable targets	Lss
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# **Emotional and psychological obstacles**

Service users who are anxious, have low self-esteem and/or are experiencing strand social care, attending appointments and having treatment are too much to

- Those experiencing low mood might struggle to find the motivation to prio
- Some individuals may be resistant to seeking healthcare due to anxiety about health needs.
- Specific fears, e.g. needle phobia and hospital-related anxieties, can deter people from seeking medical care, leading to infrequent attendance.
- For individuals dealing with severe mental health issues, such as agoraphos
  the act of attending medical appointments can be particularly daunting.
- Personal attitudes towards health issues can profoundly influence healthrelated behaviours. Individuals who hold concerns about the safety of vaccil for instance, are less likely to accept an invitation to a vaccination clinic.

These emotional and psychological obstacles can significantly impact an individual healthcare and social services, emphasising the importance of tailored support as barriers and promote better health outcomes.

# Time constraints

Work, family and carine and insments can be obstacles to health and social care own health and lery overscheduled or pre-occupied with the well-being of may have to judgements about what they can and cannot manage to fit in appointment for a painful health condition but not turn up for routine screening screening. Many health and social care services run during working hours, with we to access for working people.



# Availability of resources

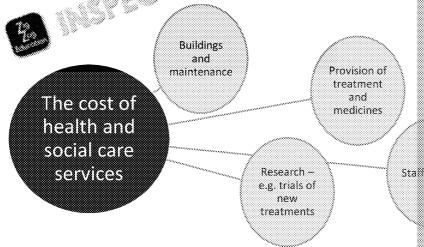
The provision of health and social care services is an essential part of a healthy, functioning society. However, it involves spending a lot of money, and it forms a substantial part of the government's budget. The Department of Health and Social Care is responsible for running and funding health and social care.

The NHS is funded primarily via taxes and *National Insurance* contributions, with a small amount coming from service user charges (for instance, prescription costs). Currently, the NHS budget is in a *deficit* – the cost of providing services is huge, and the amount of funding provided for these services is insufficient.

Nation are property your sthe st

> **Defic** organ mone

Can you think of some different thing a lat a health and social care budget would few ideas:



Limitations in the amount of resources available affects the quality of health and does not just mean the finances of a service – it also means the kind of facilities, Where resources are limited, the standard of care decreases, particularly if efficient identified and implemented. Examining the barriers to service provision as a result important so we can plan ways to overcome them.

# Staff shortages

Health and social care services are often understaffed, with a high staff turnover of staff leave, with lots of new staff replacing them). Health and social care profesmay suffer from **burnout** (see previous keyword box in **Section A1**) due to the denature of the work they do. As a result, staff may leave the profesmant seek employers which has a knock-on effect on cther that service. Remaining stop required to work extra shifts, which is a part to further burnout. This is a vicious these staff may then leave themselves.

This repres part of accessing services because appointments may be determined professional present to carry out part

Staff shortages can also further the problem of limited financial resources in health and social care services. This is because *agency staff* might need to be called in last-minute to cover shifts. Agency staff cost substantially more to be employed than regular staff, and thus contribute towards increasing costs of health and social care delivery.

Agency staff registered with provides health casual basis. If due to the abspicking up shift.



# Lack of local funding

Decisions about what to spend the health budget on are made locally by integrate Health and Care Act 2022.



# Case study

lan and Maya, both 35, are trying for a child but are sadly They have been in contact with their general practitioner above were hopeful that they could receive treatment from their loc were informed that fertility services have recently had massive to financial pressures. This means that not all fertility services and they may not meet the new, strict elicibility criteria to remay need to find the money to fundament privately, or exhibit has better fertility services.

Applied activ<sup>†</sup> \* 3 Luss or with a partner, imagine you are members of the partner of the partn

# High Level of Need

Health and social care services are also in high demand, as there is a huge number of people who need to use them. The cost of such heavy use of services can also work as a barrier to services in the long term. In trying to compensate for the high costs of a particular service, another service may be reduced or withdrawn to save money.



en U

The Child and Adolescent Mental Health Service (CAMHS) has long waiting lists, a people do not receive the support they need from NHS mental health services. Vecharity Young Minds) and school counselling services help to plug the gaps in NHS

High demand for services means that people might find themselves on a waiting list for an assessment, service or treatment. If the wait for a treatment takes a long time, someone's health problems might deteriorate. In this scenario, the person is suffering worse health outcomes, their needs are not being met, and the total cost to health and social care services is likely to be much greater.



Sti 4 †h

## Case study



Peter, 87, has recently had be at argery. He has now surgery, but is not ablanced to be hospital yet. This is bestransferred to be identified home, but the home is not a

January January and the sound in the sound in the bed-blocking. This is a problem because it means the hospital unnecessarily and prolongs the time that other for the hospital bed.

**Applied activity:** Can you think of ways to reduce the problem of 'bed-blockins' with a partner or as a class. What are the pros and cons of your suggestions?



https://www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf

<sup>39</sup> https://digital.nhs.uk/data-and-information/publications/statistical/statistics-on-smoking/statismoking-related-ill-health-and-mortality

# Unachievable targets

Sometimes health and social care professionals set targets which are unachievable scale is unrealistic. This can apply to long processes which people can find difficult weight. In these situations, service users can lose confidence and stop engaging we however, a proactive, sympathetic follow-up with more achievable goals from the professional can help boost morale and get the individual back on track.

# Case study

John, a 45-year-old man receiving health and social care for weight-related conveight loss target of 30 kg in just two months, leaving him demoralised and dissent and empathetic follow-up by his healthcare provider legal re-evaluation of a more realistic target of losing 5 kg in the first such, cusing on gradual, such adjusted goal, John regained confidence with a small target, and re-engaged significance of setting achievables and see a malised targets to boost service use term engagement and we'll a second service use

# Lack o pport

Many individuals in the UK have little or no support from family and friends; for they are attending hospital for a medical procedure. This typically raises their and go ahead at all (for example, those requiring sedation and discharge home within someone else).

Elderly people and those who have disabilities, especially learning disabilities, are support to access and attend health and social care services.

Recovery from illness or injury is more difficult without the support of family and situation are also more likely to have a delayed discharge from hospital due to in

# Other factors specific to the individual

Anyone who is living with disability, health conditions or addiction may find it may and social care services. Disabled people may experience access issues, whether phone when hearing-impaired, or accessing buildings if a wheelchair user, to unwith a learning disability.

Physical or mental health conditions can lead to cancellations and delayed treatmor missed opportunities, such as missing out on the benefits of a day centre due

People who are living with addiction face multiple challenges. Their addiction is mental health and impact them financially, and may do go heir relationships to chaotic, and accessing health and social care bottomes, sogressively more difficult helpful, but individuals may not engage of the same when battling with the addiction.

Applie (it) and add to your list to see how many can think of

# 



# B3 checking my understanding

- State what is meant by obstacles to accessing health and social care
- Explain how having a mental health issue, such as agoraphobia, may with health and social care services.
- Discuss why a person with time constraints may miss routine medic
- 4. State the two main sources of funding for the NHS.
- 5. Describe the impact of insufficient funding on similar levels in heal
- 6. Outline **three** consequences of bir enalth and social consequences
- 7. Describe how lar carport from family and friends can be an obsand services.
- Explain now having an addiction can be an obstacle to engagement services.
- 9. Read the case study below:

Mary, aged 82, attends a day centre some distance away. She expension spinning sensation, making her unsteady on her feet and sometimes

Describe how this long-term health condition may sometimes be an at the day centre.

10. Read the case study below:

Alex is a 13-year-old who has asthma and has been advised by his The doctor sets him a target to stop straight away, but Alex believe achievable for him due to the peer pressure he is under as his schewape. His parents are worried and take him to see the asthma clinical approach after discussion with the asthma doctor. As Alex is internurse refocuses his mind on the benefits of exercise and sets a tarkarate club which also has regular social sessions. The nurse right develop this new interest and a new friendship group and his use although this will take some time.

Evaluate the advantages and disadvantages of etting achievable g





# B4: The benefits to individuals of the and values in health and social c

In Section B1, we explored the skills and attributes required in the health and so problem-solving, the ability to observe and assess situations and effectively manimportance of being organised. Additionally, we considered the indispensable at professionals, such as empathy, patience, trustworthiness and honesty. These quand positive relationships between service users and service providers, and for explanations of the service providers.

In Section B2, we looked at the 6Cs – care, compassion configuration, and how they serve as guiding principles of health and social care.

In this section, we will investigate the trible benefits that stem from these essembles within health and social of the well-benefits, enhancing a person-centred approach that a outcomes the unique needs of all service users.

# Supporting individuals to overcome their own

Supporting individuals in overcoming personal obstacles involves utilising health attributes and values to assess the individual's health, social circumstances and elidentify barriers to accessing care. Skills such as observation, and attributes such with values such as competence and communication, play a vital role in this assess identified obstacles, individuals may require referrals for support, advice on charand social care services. For instance, a service user facing challenges such as trappenent from guidance on accessing benefits and debt management through reschelpline, demonstrating the comprehensive approach to addressing personal bases.

# Supporting individuals to receive high-quality

All the skills, attributes and values mentioned above are important in ensuring in However, organisational barriers (such as low staff numbers) and other circumst pandemic) can threaten the quality of health and social care that individuals receivoiced frustrations about pay, workload and standards of care in the NHS. Against and values, though important, do not fully ensure high-quality care for individuals

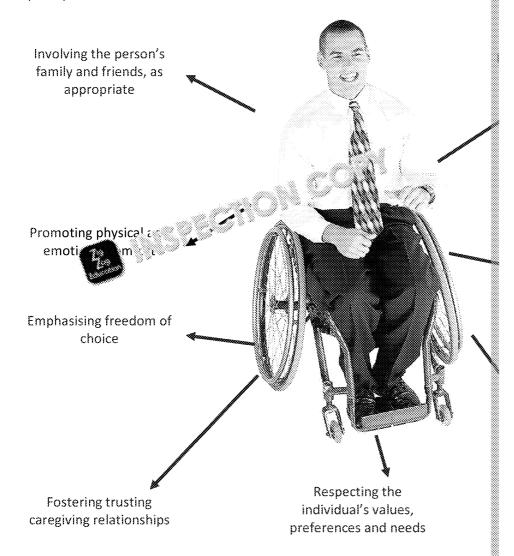
# Supporting individuals to receive person-cent individual wishes

Skills, attributes and values in health and social creeting bute to person-centres care. A person-centred approach to care in the sepecting the individual's personal needs; it makes the individual peaner than their health conditions) centre to the care plan. It means the following the wants, desires and goals of the individual needing care, involving the service user in every aspect of the care process. If replace, involving the service user in every aspect of the care process. If replace, involving the service user in every aspect of the care process. If replace is not shown, it makes individuals feel as if they do not matter lowers their self-image and self-esteem. Respecting service users makes them few valued and included in the running of the service they use.

# 



There is a number of different frameworks that have been developed by nursing nurses to implement person-centred care. While each of these frameworks is slightly components:



The table below contains some more details of ways that individuals can be respect

Taking responsibility for the care and well-being of service users	This involves ensuring the highest level of care for individual's wishes surrounding their care, but also care falls below a certain standard there will be co
Not using terms that are offensive to individuals and groups	This involves not using racist or discriminatory term aware of certain things such solveds and body sign offensive to service solveds and people working with
Using the appropriate terms where directors in the second	Always 251 50 users how they would like to be him neit is mame. Do not use slang terms or other him ppropriate. Do not use slang such as 'You all right your day?', or 'cheers' instead of 'thank you'. Some appreciate informal use of language, and care provensure that they are addressing individuals with re



# Case studies — showing respect for individual n

- There are a number of people in a care home in London who are vegan. The
  has always given the residents the choice of vegan foods. This shows respect
  choices that the individuals who live there want to make or have made.
- 2. Mrs Gold has been in a care home for three years. She feels comfortable the made a lot of friends. One of the carers in the home, Jane, calls Mrs Gold be name. Mrs Gold has asked this carer not to call her by her first name a number Mrs Gold has become frustrated and angry that Jane has not listened to or acknowledged her request not to be called by her first name. Mrs Gold has complaint and no longer wants to be cared for by ! Jane had a complete respect for Mrs Gold's views, and this shows a firstile.

Appli vi. Look at the case studies above, and reflect on the ang questions:

- 1. What do you think would happen if the residents of the care home were not allowed the choice of vegan foods?
- 2. Why do you think Jane called Mrs Gold by her first name? What should happen as a result of Mrs Gold's complaint?





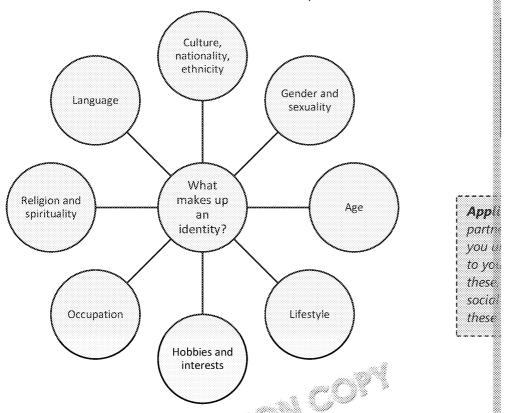
# Supporting individuals to be treated with resp

Attributes such as empathy, and values such as communication, help health and with respect. It is very important to respect an individual's beliefs and identity, for

Many service users will have particular beliefs that should be taken into account care. These may pertain to their cultural and religious requirements. For example halal meat due to their religious beliefs, the care provider must respect this and service user.

Inclusive language should also be used to promote positive relationships in health respect individuals' beliefs and identity. Inclusive language is anguage that is free words/sentences/phrases/terms that exclude a probability froup. It is the use of large relation to people or groups. Care a rice of must ensure that when talk manner that does not use, for example and a relationships in health respect individuals' beliefs and identity. Inclusive language is anguage that is free words/sentences/phrases/terms that exclude a probability anguage that is free words/sentences/phrases/terms that exclude a probability anguage that is free words/sentences/phrases/terms that exclude a probability anguage that is free words/sentences/phrases/terms that exclude a probability anguage that is free words/sentences/phrases/terms that exclude a probability anguage that is free words/sentences/phrases/terms that exclude a probability anguage that is free words/sentences/phrases/terms that exclude a probability and probability

What makes the second form of the little important that health and social care services take account and provide voice that meets these as far as possible. Look at the diagram for contributes towards someone's individual identity.



How can health and social constitution persure that someone's needs and preferenticularly difficult in the son is not able to communicate these verbally. Here help in this the constitution is a son is not able to communicate these verbally.

- Ask the tives, or other care professionals who work with them. What d
- Familiarise yourself with their care plan this might be written by people was spent a lot of time with them their needs and preferences may have become
- Keep an eye out for behaviour that suggests a preference for example, if the particular food or drink.
- Make use of things such as picture boards to ask their preferences doesn'



# Supporting individuals to not be discriminated

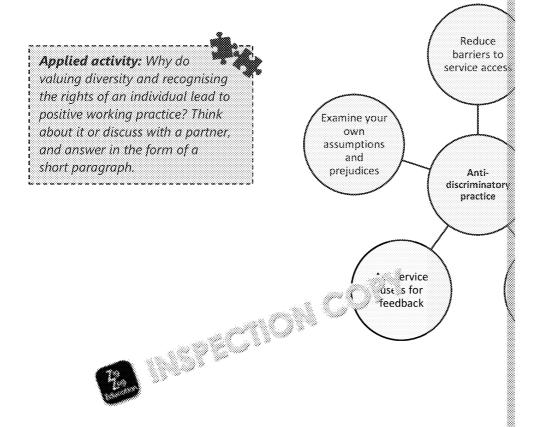
Part of professional practice involves treating people equally. This requires the vaccommitment to improve the care and experience of individuals.

Professional practice involves not judging or **discriminating** against other individe whether you approve of their lifestyle or not. Providing effective health and social diversity, and ensuring that people are not discriminated against in the delivery

According to the Equality Act (2010)<sup>40</sup>, discriminating against others on the basis illegal, both in the workplace and in wider society. What are these protected cha

- Age
- Sex
- Race
- Sexual orientation
- Gender reassignm ( 'Sat )
- Disabil
- Religion/belief (or lack thereof)
- Marriage and civil partnership

Therefore, it is not legal to treat someone differently based on their gender or raservices should provide high-quality care and support to everyone, regardless of important to promote anti-discriminatory practices – but how can we do this?





<sup>40</sup> http://www.legislation.gov.uk/ukpga/2010/15/contents

# Supporting individuals to be empowered and N

It takes the skills of problem-solving and organisation, and the attributes of patie values of competence and commitment, to support individuals to be empowered

If you are said to be 'empowering' someone as a health and social care profession encouraging their confidence and ability to follow their own path in life. This is conservices – if people are receiving services, they may already be in a difficult place empowerment or loss of control in previous circumstances. It is important to help confidence and self-esteem, as this impacts heavily on well-being.

One way to empower service users is to ensure that certain approach are made participate fully in activities. Certain individuals have the sale, intellectual, emotions of further adaptation in order to ensure the sale sale. Read John's case study

# Case study

John is 34 old. He had a serious car accident two years ago. This accident memory loss and paralysis from the waist down. John now spends his days in do and participating in activities. John was a popular artist before his accident; he career out of it. He hasn't tried to paint or even wanted to paint since the accide he has forgotten how to be an artist. Next week, Mary has booked a group arcentre, and John has asked to come along. Mary has made some special arrangements for him to ensure he can come. There is wheelchair access for him, disabled toilets and ramps; this allows access to the places John would like to go giving John the choice to come to the art class and by carefully planning the trip Mary has empowered John and the other residents. Enabling full participation by all individuals helps to meet their specific needs in a positive way.

# How have John's specific needs been met?

Mary ensured that there

in the class; perhaps John will start painting again and

develop new skills.

would be wheelchair access into the building where the art class was taking place.

PHYSICAL EMOTIONAL

Although John believe a has forgot we paint and be an the can be reminded by an art teacher

Disabled badge

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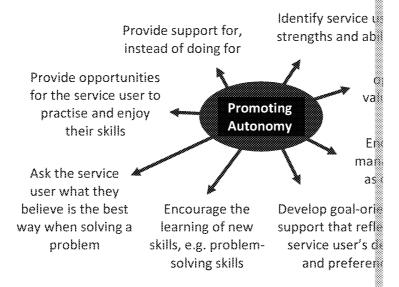
Another way to empower service users is to offer them access to an advocate. As someone who supports a service user; they do this by communicating that service when that individual is unable to do so him/herself. Usually, advocates work for organisation or volunteer group. People who have a legal right to independent as from dementia, a personality disorder or an acquired brain injury. Other individual with a physical disability, adults at risk of harm and carers also have access to indi-

Advocates help people with a number of things:

- Accessing information to explore and understand their options
- Expressing their own needs and wishes
- Accessing services to which they are entitled
- Getting their rights upheld
- Accompanying them to a meeting; for example, it he social work departs
   GP or the NHS
- Speaking on their behalf if they is a see confidence or have difficulty with communication
- Safeguate space of people who lack capacity

# **Promoting independence**

Promoting independence refers to keeping or improving physical, intellectual, enfulfil the tasks of independent living, such as maintaining social relationships and care. Here are some examples of promoting autonomy:<sup>41</sup>



Look at the case study below to see how promoting indepairmence might look in

# Case study



Andy are not ison, 29, are both support workers at a residence with learning disabilities. Today, they are working with eady to move in to his own flat in a few months' time.

His apartment in the service needs to be tidied and cleaned discussing how to go about this. Rob thinks that he and Andy it themselves while Will has a lie-in, because this will be quick it is important to involve Will, and help him learn ways to make the service of the service will.

**Applied activity:** Whose approach do you agree with – Andy or Rob's? Why? We each support worker's strategy be on Will? Discuss with a partner.



<sup>41</sup> https://www.mentalhealth.org.uk/a-to-z/m/mental-capacity

# Supporting individuals to be involved in care &

As far as possible, the individual should be involved in making choices surrounding values of compassion and commitment to high-quality care. Placing the individual involves many different elements; as a carer you should always involve the individual ensure that the service user has had the opportunity to give input into their care decisions were made about your care, and nobody asked you for your opinion on

The individual service user is the person who needs care; they should be at the confidence of their care plan. Carers have a duty to communicate with the individual and encourage them to make choices when deciding the right care plan. Sometimes, carers overlook the individual and treat every service user.\*

In order to care for the individual, carers chessed as systimvolve them when making plan; ask about the individual with the solution sufficient pain relief? What would you like to wear today? Are you hungry Are there are vivided to a would like to do today? Person-centred care help an individual with the sufficient pain relief? What would like to do today? Person-centred care help an individual with the sufficient pain relief?



# Case study

Carol, 40, is a support worker at a residential service for women Today, she is supporting Katie, 22, and is talking to Katie about morning. It is Saturday morning, and residents at the service are breakfast together. However, Katie has also been invited to go other friends. Carol talks about this with Katie – Katie has decide breakfast; she doesn't want to miss breakfast with her friends.

**Applied activity:** Read Katie and Carol's case study above. Why is it important the choice about how to spend her morning? What positive effects could this have for as a class.

When people's right to make choices is not adhered to, there can be many negative effects, including emotional, physical and social effects. Individuals who feel that they have not been listened to will come to believe that they are of no value. If the overall medical and nursing needs are the only things taken into account, the individual could withdraw, feeling worthless. This can also lead to overlooking the medical needs of the individual; for example, there is a possibility of increasing severity of symptoms — if a professional does not take the time to communicate with the individual, then this information could be overlooked, affecting the overall care of that individual.

A key principle of helping service users to make conjection themselves about the treatment the series informed consent. This is a matter of ethical principle of parts of informed consent are:

- medical procedure. Size parts of informed consent are:
   The climbour fully explain the procedure, in a way the perioderstands. They must explain any possible risks and benefits, and how the procedure works.
- Does the person making the decision have capacity to do so?
- Someone with capacity has the right to refuse to give consent – even if this could result in adverse health problems. It is their right to make that choice.
- Consent can be written, verbal or non-verbal (for example, by nodding).

Informed

a decision they have that will all decision wor not.

Capacity make a de the ability the inform that decise consider

communi



# Supporting individuals to be protected from ha

Safeguarding and duty of care refer to making sure that service users are physical and emotionally safe. This includes avoiding *negligence*, and ensuring that the calenvironment is safe and healthy. As someone working in health and social care, will receive training on safeguarding and identifying possible abuse. This aspect whealth and social care work calls on the attributes of empathy, patience and honesty, along with the values of courage and commitment.

# Case study - ensuring the physical and emotional safety



Mrs Gold has been diagnosed with Alz's a leeping. The inability discomfort and loud notice along agreement and loud notice along agreement and loud notice along a leeping.

In order As Gold and the other residents within the harmonic in the room to defuse the situation. Taking Mrs Gold away harmon the other residents; it gives Mrs Gold the opportunity to left in the room with the other residents, she could become incressituation and would lash out or hurt someone, such as a carer of

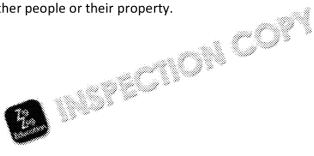
# Current and relevant codes of practice

The codes of practice are developed to reflect existing good practice. Employees the codes as the standard of care given by them each day. For others, it will be the aspire to give as social care workers.

Health and social care workers must do the following:

- Protect the rights and promote the interests of service users and carers
- ☑ Strive to establish and maintain the trust and confidence of service users ar
- Promote the independence of service users while protecting them as far as
- Respect the rights of service users while seeking to ensure that their behavior other people
- ☑ Uphold public trust and confidence in social care services
- Be accountable for the quality of their work and take responsibility for main knowledge and skills

Every individual who works within care has a duty to follow a professional code of practice. When an individual working within the care sector fails to apply these coincidences of negligence. We all have a 'duty of care'; it involves taking reasonable harm to other people or their property.



# 



# Case study - negligence



Ed, 22, was admitted to hospital after falling and getting a limet with his doctor, and the doctor told him there was nothing just involve a few stitches. The young man told the doctor he lifelt very dizzy before he fell. He explained that he stills feels. The doctor nodded at Ed while picking up the medical equipm to the young man, the person who was in the room before him the doctor was using the same equipment that was used on the The doctor sent the young man home with no other tests to try the collapse.

A few days later, the area around the cut became discorres and extremely pain had continuous headaches and dizzy spells. They are an an went back to the docts symptoms he was having; the doctor are to be use of unsterilised equipment and Ed later collapsed and died in succession and the strain it had on his be a life-threatening brain from which was giving him the dizziness and headaches his symptomatic and the infection might have been his mistake; this show healthcare sional does not follow the code and/or ignores the duty of care

So what does 'safeguarding' involve? If you suspect that harm is likely to occur in a particular scenario, or to a particular service user, you have a duty to act. You need to report the issue to your supervisor, who may complete a safeguarding referral. This procedure involves reporting the safeguarding issue to your local authority, who will then determine the appropriate course of action. The scenario may also require immediate action to prevent imminent harm, such as contacting the police or ambulance services.

there at to med

Because of the requirement that care workers act to safeguard service users, the which confidentiality can be broken. This is because protecting someone from a important than confidentiality.

## Abuse

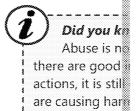
'Abuse' refers to ill-treatment of an individual, and involves the rights of an individual, being violated. Abuse can cause severe harm to someone's well-being. There are several different types of abuse, along with different indicators that abuse is occase the table below for some examples.

Type of abuse	What is it?	What
Physical	Deliberate physical harm or injury	Bruises, cuts, brok
Emotional or	Actions that can harm someone's	Low confidence, e
psychological	emotional health, e.g. bullying	withdrawn
Sexual	Forcing someone ் ke நார் in sexual	Inappropriate sexu
	activitie: ( ls ) sake place online.	transmitted infect
Financial	N'. w sr controlling someone's	Sudden change in
	finances	money, bills unpai
Institution	Practices carried out by a service that	Medication misus
	limit individuals' freedom and dignity	failing to treat ser
Domestic	Abusive behaviour in the context of an	Controlling behav
	intimate relationship, such as a marriage	abuse, e.g. sexual
Neglect	Failing to meet someone's needs for	Unkempt appeara
	physical and mental health	malnutrition

<sup>42</sup> https://www.nhs.uk/news/medical-practice/one-in-20-hospital-deaths-preventable/



Applied activity: There are many different things that can help you identify an abusive situation. The table above contains a few, but there are many more. Look up three more key indicators for each type of abuse.



Here are some tips for handling a disclosure or suspicion of abuse:

- Do not ask leading questions let the person lead the discussion, and use t\( \begin{aligned}
   & \text{ of } \\
   & \te
- Write a detailed record of everything they said, as soon as possible followin.
- Do not confront the alleged abuser.
- Make sure you report it don't assume that same will do it.
- Report the issue even if you think it is used is occurring it's bette
- Try not to show strong emotions has snock or anger during the disclosure
- Do not promise to kດລຸ່ງ, ຈາງ ⇒et.



## Case study



Alan, 38, is living in supported accommodation for people with in Morning medication time is set for 8am, but Alan is more of a night 10am. He has asked staff if he can have his medication later so woken up (or miss it), but they said that is not the routine in the highest trace of the routine in the routine in the highest trace of the routine in the routine

**Applied activity:** Read the case study above. Who kind(s) of abuse is/are occurring here? How can ye

# Supporting individuals to feel comfortable to x

To cultivate a culture that encourages service users to comfortably raise concerns professionals should have qualities such as approachability, care, compassion and

# Fostering a complaint friendly environment:

Service users should feel comfortable raising complaints, and for this to happen, health and social care professionals must exemplify approachability and uphold voices such as care, compact decommunical Acquirionally, they should post the sensitive nature of complaints.

# Addressing complaints with competence:

Complaints may be well-founded, and healthcare or spinoals must avoid rear and discussively but recommunication skills can minimise misunderstandings and contribute to issue resolution. Competence, one of the 6Cs values, entails documenting, reporting and professionally handling any complaints.

Managing complaints professionally and competently can not only resolve issues opportunities for learning and improvement within the healthcare system.

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### Supporting individuals to have their dignity an

**Dignity** refers to treating people how they would like to be treated, and everyone deserves to be treated as someone who is important and worthy of respect. Having the attributes of empathy and patience will help health and social care professionals to treat service users with dignity.

Dignity has been recognised as a basic human right in many different regions of the world. Treating people with dignity has been prominent in religious teachings as well as within the health and social care sector. The question is whether or not service users are receiving this basic human right.

This is a recent headline by the BBC news: 'Concarputting stricter time limits on eldow', 'a wis news article went on to say that we wen one basic care need and another as snowering or being made food. The reason for the sthat home care visits have been squeezed by local councils to last only 15 minutes, but 15 minutes is just not enough time to assess the needs of an individual as to well as wash, dress and feed them.

**Dign**invol

Privas mean matte know

**Applied activity:** Readers: http://www.bb.

What kind of care is the What effects could the having on the service effects as you can. Such ave they identified missed? Write them

### Case study - preserving a person's dignity

Mr Jubb is recovering fast but is still in need of care. He has been given a committee to let. Ann, a nurse, has assessed whether the use of commode is the most appropriately prefuses to use a bedpan, so the commode has been put in place. While Mr always closes the curtains around his cubical and stands outside to ensure Mr Jubpervent others from walking in. Ann also always uses non-verbal communication to when he should stand up and provides hand-washing facilities and air freshener, comfortable using the commode when Ann is on duty. When others are on duty, he comfortable; other members of staff and nurses have shouted instructions at him curtains while he has been using the commode, saying things like 'stand up from the and I will clean you up'. Mr Jubb has always been a very dignified man, but when nurses are on duty he feels uncomfortable and undignified using the commode.

Later Ann and Kylie found out that Gordon, the man who said he was Mr Jubb's lying and that he was in fact a journalist. Mr Jubb is a top member of the police was printed about what happened and explained that he was near to death. M who had been in the hospital earlier that day, were shocked and outraged that information about his condition was released to the media.

Ann has a very effective way of treating Mr Jubb; and reads him with dignity and have seen how effective Ann's approach as a pave started to change the way to Ann had tried to get Mr Jubb to a set to supan, she would be ignoring his wishes esteem and enforce the set of the way unimportant, leading to him becoming

An importation of promoting dignity includes preserving the *privacy* of service important regarding intimate and personal care, as this can make people feel versured out. Care staff should try as far as possible to promote privacy — for examples of the privacy — for examples

Applied activity: Can you give three examples of an individual having dignity?
Swap examples with the students next to you and make a comparison between what you wrote and what the person next to you wrote.

Applied activity: Can you to undignified? Describe this time this incident? Write about a someone else feel undignified making them feel this way at try to make up for making the

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### Supporting individuals to have their confident

The attributes of trustworthiness and honesty are key to health and social care starvice users.

### What is confidentiality?

Confidentiality refers to keeping an individual's information private. It is important to know the rules of confidentiality when dealing with information from a service user. This is critical for respecting someone's privacy and dignity especially given the extremely sensitive nature of information that health and social care professionals know about people accessing their services. Would you want everyone knowing the most private details of your life?

### Safe storage of records

In health and social care, there is a decommentation to be completed, and, to confidential, sensitive and you will comment about service users. It is critical to legal duty to confidential and confidential confidential and confidential con

Here are sor aggestions for safe record-keeping:

- Electronic records:
  - Keep your password and other information for logging in safe and secul
  - Set a strong password and keep it secret.
  - If you think someone might have seen your password, change it right a
  - Do not leave the computer logged on.
- Paper records:
  - Store them in a safe place which you can lock up, e.g. filing cabinet, and do not leave the keys lying around.
  - Do not leave service user records out.
  - When disposing of them, shred paper records.

### Sharing of information

There is often a need to share information about service users in a health and social care setting. This is to ensure that care is provided consistently, and in a high-quality way. By sharing information, professionals can understand the best way to care for and treat that person. However, you must be very careful that you are sharing information in the right way and with the right people.



Sharing information should be done on a need-to-know basis – there is no need to discuss one service user's care plan with another service user, or disclose identifying information about a solution in a service user to your friend service user with other professionals (outside you se vide, will often involve gain service user.

Applied activity: hat you have attended hospital, and the clinic now has and your have. The hospital rings you to tell you your medical records we released to bublic.

- How do you feel now?
- Who would you blame: the thief or the hospital?

Discuss your answers with a partner.





### Case study - maintaining confidentiality

Ann has been working in a hospital for three months as a recently qualified nurse service user; his name is Mr Jubb. Mr Jubb has been in an accident which has left on her way to check on Mr Jubb, she saw a young man standing outside his room, name was Gordon and that he was Mr Jubb's brother; he asked Ann what had he was OK. Ann knew that giving out information about her service users was a break Gordon that she could not talk about the service user at this moment, that he should for the doctor, and that she would inform the doctor that Gordon was there. Ann of her service user.

What Ann did not realise until afterwards is that add, after he spoke to Ann, the same ward; her name is Kylie. Gordon and the same questions he as Jubb's brother. Kylie told Gordon that the same having. Kylie also told Gordon would not survive the same and there are the same questions and there would not survive the same questions he as a way of the same questions he as Jubb's brother. Kylie told Gordon would not survive the same questions he as a same way of the same questions he as Jubb's brother. Kylie told Gordon would not survive the same questions he as a same ward, and the same questions he as Jubb's brother. Kylie told Gordon was in critical condition and there are a same ward, and the same questions he as Jubb's brother. Kylie told Gordon the same questions he as Jubb's brother. Kylie told Gordon the same questions he as Jubb's brother. Kylie told Gordon the same questions he as Jubb's brother. Kylie told Gordon the same questions he as Jubb's brother. Kylie told Gordon the same questions he as Jubb's brother. Kylie told Gordon the same questions he as Jubb's brother. Kylie told Gordon the same questions he as Jubb's brother. The same questions he as Jubb's brother. The same questions he as Jubb's a same qu

Later Ann lie found out that Gordon, the man who said he was Mr Jubb's was in fact a journalist. Mr Jubb is a top member of the police force. A story was and explained that he was near to death. Mr Jubb's family, who had been in the shocked and outraged that personal information about his condition was released

Sharing this information is poor practice and can have a huge impact. Imagine if surrounding the health of other service users in her care; there would be serious only for her but also for the individual whose private information had been given information surrounding a service user who had HIV, that person's private information threaten, exploit, discriminate and perhaps ostracise that individual. The impact family means they have no longer any privacy as the media will keep wanting informore stress and anxiety for the family. They could even sue the hospital for poor

Here are some other examples of breaches of confidentiality:

- Unauthorised reading of a client's medical file or an employee's file
- Random searching of research client databases for familiar names
- Accessing information on family friends or colleagues
- Conducting a conversation relating to client or staff information in a public
- · Telling a relative or friend information about a client or staff member
- Discussing confidential information in a public area, such as a waiting room
- Incidental disclosure about a family member other than the client
- Making unauthorised changes to a client's file
- Making unauthorised changes to an employee's file
- Being away from your desk while you are logged in the system.
- Allowing a colleague to use a secure system or which they do not have access

However, it is important to not that there are some circumstances in which confidence of the case in t

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### Supporting individuals to have their rights pro

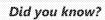
Individuals have rights under many laws and regulations, such as the Equality Act 2018, both mentioned previously.

Health and social care staff have a duty to support individuals to have their right.

- to not be discriminated against
- to have their confidentiality respected
- to be given understandable information about options
- to have the chance to give informed consent and to withdraw that consent
- to apply to read their medical records
- to receive skilled, appropriate and safe health and solutions

This requires that health and social and social are second social and courage to call out a colleague for discriming for example.

Empathetic is and social care professionals will understand that service users make a complaint if they believe the service has not been up to standard. Being defined questions or makes a complaint about their (or a loved one's) care would show a limit of the complaint about their (or a loved one's) care would show a limit of the complaint about their (or a loved one's) care would show a limit of the complaint about their (or a loved one's) care would show a limit of the complaint about their (or a loved one's) care would show a limit of the complaint about their (or a loved one's) care would show a limit of the complaint about their (or a loved one's) care would show a limit of the complaint about their (or a loved one's) care would show a limit of the complaint about their (or a loved one's) care would show a limit of the complaint about their (or a loved one's) care would show a limit of the complaint about th



The Duty of Candour legislation requires that health and social care service when something goes wrong with a person's care, such as them being given the medication. In these circumstances, health, and social care professionals (including truthful, apologise, investigate, document, and learn from the event to help pre-

Communication is key in promoting service users' rights.

**Applied activity:** Imagine you are the manager of a care home. A resident's relicupset and angry because their mother's mouth looks very dry as if they have not drink for some time. Discuss with a partner the communication values you could





### **B4** checking my understanding

Read the case study below:

Kirsty is a community mental health nurse who is working with ser has not left home for over a year due to agoraphobia. Kirsty is sup stepping outside a little further each week. This is an example of h overcome obstacles.

Identify three benefits of helping service users to overcome their particles.

Read the case study below:

John is 60, and lives in a care home for object adults with learning & having a care plan review " It , E place in the home's conserva worker and the home negar. The care staff talk to John about ho home, and as's the new things that he needs help with or Jo wexplains that he has been struggling to get up the 🛭 become arful. The care statt reassure rum mar mey amount that his planned move to a downstairs room is happening this week goes well, and John is happy about the outcome.

- a) Identify how John's independence has been promoted in this so
- b) Discuss how John's quality of care, person-centred care and abill may have been enhanced if he had an independent advocate will
- 3. Explain why not discriminating against individual service users is is
- Give an example of respectful behaviour towards a service user, and 4.
- Why is promoting empowerment and independence important in h 5.
- 6. What is meant by 'safeguarding'?
- Define 'neglect', and explain three ways this can impact on someon
- 8. Outline why it is important that service users feel able to complain been below a reasonable standard.
- What is meant by 'confidentiality'?
- 10. A service user tells a mental health worker that they want to arrange records. The mental health worker explain and procedure for arrange

Explain how giving this information protects the rights of the service 







### Answers

### A1 and A2 checking my understanding questions

- Primary care is the initial point of contact for most people when accessing health see services deal with common health needs.
  - **Secondary care** is more specialised, usually takes place in hospital, and usually involved healthcare practitioner.
  - **Tertiary care** is more specialised still in order to manage highly complex medical new residential care. Tertiary care also usually involves a referral from another healthcase.
- 2. Students could list three from each of the following (or others as appropriate):
  - Primary care
    - General practitioner
    - Dental care
    - Community healthcare
    - Optometry

Secondary care

- Urol
- sy logy
- Renal medicine
- Dermatology
- Rheumatology
- Vascular surgery
- 3. Physicarpy helps people who have problems with their joints, soft tissue and
  - Physiotherapy can also help people who have suffered a change in mobility as allied health service.
  - Physiotherapy can also involve the development of exercise programmes, the of electrotherapy.
- 4. Multidisciplinary team working means different professions working together service user needs, particularly if the needs are complex.
  - Doctors, allied health professionals, support workers and social workers may lead to discuss the individual's care.
  - The diverse perspectives and skills of the range of professionals can help ensu.
  - However, the differences in perspectives and priorities of the different profess working quite challenging.
- Foster care is when a child goes to stay with another family in their home, per or not it is safe for a child to live at home. Placement can be short-term (up to 18 years old).
  - Residential care is an alternative social care service for children who do not live
  - Youth work includes provision of youth clubs, outreach work with young people aim to promote health and well-being.
- 6. Reasons for an elderly person moving into residential care include:
  - The person is no longer able to look after themselves safely or live in their ow
  - Deteriorating health and/or mobility
  - o Presence of a neurodegenerative disease such as dementia, requiring specialis
  - Support required to carry out personal care tasks such as bathing
  - o Inability to prepare food at their own home, me ്രാക്ക് e is a risk of malnut

A residential care service can help them to see and healthy in many ways, incl

- o Frequent contact with special ಕ ಿ ಇದು care staff
- o Provision of special and hoists to aid mobility
- o Support to this has falson safely (for example, at the right time and in the right
- o Promonatritious food
- Of ctivities and opportunities to socialise
- 7. Students could list three from the following (or others as appropriate):
  - Bathing
  - Help to use the toilet
  - Help to get in and out of bed
  - Cooking
  - o Feeding
  - Budgeting and finances
  - Support with medication
  - Trips out and socialising



### 8. Advantages of being an informal carer (or others as appropriate):

- Rewarding, as can deepen relationship with loved one
- Gives purpose
- Opportunity to re-evaluate priorities in life

### Disadvantages of being an informal carer:

- Impact on physical and mental health
- Risk of burnout
- Financial loss
- 9. Roles of voluntary sector:
  - Provide services which complement NHS and council social services
  - May plug gaps in provision for example, out-of-hours and health support.
  - Voluntary sector provision includes information an alti and well-being, transsupport vulnerable or disabled individuals.
  - Some voluntary organisations id advidualised support, such as advocace
- 10. a) Students could any of the following (or others as appropriate):
  - a. The discharge adaptations to overcome visual impairment / risk of falls & b. Sel isolation
  - c. rransport issues
  - d. Risk of taking medication incorrectly
  - e. Mental health feeling low, risk of depression
  - b) Students could discuss any of the following (or others as appropriate):
    - Home adaptations need will be met assessment has been done and wo on the staircase will reduce risk of falls
    - Social isolation need not met perhaps refer Jonathan to support groups sensory impairment to help him meet others going through a similar exp
    - Transport issues needs not met supporting service user to access trans
      difficulties in attending appointments
    - Medication need not met the pharmacy should be able to provide med different medications in clearly different-sized containers)
    - e. Mental health need not met referral to psychological services might be

### A3 checking my understanding questions

- 1. Students could identify any of the following (or others as appropriate):
  - No disabled parking, or having to park a long distance away
  - Steps to enter the building, or stairs inside the building
  - Signage placed outside field of vision (e.g. too high)
  - Lack of automatic doors
  - Equipment that does not accommodate wheelchair users
  - Narrow corridors
  - Lack of disabled toilets
- 2. Students could identify any of the fair win problems as appropriate):
  - Signs in large, clear for ചർ th ടുമയാട്
  - Large print in w → ⊃ cc :: munication
  - U(1) ail.
  - Us
     phone rather than written communication
  - Ensure premises are trip hazard-free
  - · Ensure clear, bright lighting
- 3. Students could explain that:
  - If something is said to have a 'stigma' attached to it, it means that thing carries unacceptability with it.
  - Feelings of stigma might stop someone from seeking help from health and soci feel that if people find out, they will judge them or treat them differently.
  - Stigma can produce feelings of shame and embarrassment.

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- 4. Barrier 1: First language other than English. Can overcome by:
  - Translation of written materials
  - Provision of interpreter/translation services during appointments

Barrier 2: Language impairment due to illness or disability. Can overcome by:

- Assistive technology
- Picture boards, touchscreens
- Sign language interpreters/translators
- 5. Students could explain two from the following:
  - Distance of service provider from service user services may be located a long user lives. For example, a hospital that provides the specialist service that som different city.
  - Poor transport links public transport can be unralized, or may involve many
    the final destination. For example, someone might have to wait for multiple in
    of extra time to make their appoir.
  - Cost of transport some reoperation, struggle to afford the cost of bus and training find the cost of bus a
- 6. 'Learning disability' is broad term covering reduced intellectual capabilities that affect this reduction in capabilities can be mild, and may affect only some skills (for examprofound, in which the person may require round-the-clock support to survive.
- 7. Students could choose to explain two from the following strategies:
  - Promotion of healthy lifestyles
  - Workplace health incentives
  - Self-management of conditions
  - Technology
- Students could name dentistry or prescription charges. They could also provide any
  their own research.
- 9. a) Students could explain any of the following:
  - Geographical barriers Derek lives in a rural location, which is a long distinguishment of the particular of the particular
  - Financial barriers the transport involved in getting Derek to his appoint involves a bus, train and taxi (in two directions).
  - Physical barriers Derek might struggle to walk due to the swelling cause may make it challenging to walk around the hospital and catch the public
  - Psychological barriers due to fear, Derek may avoid going to his appoint worried that he will develop lung cancer, as his father did, and would rath
  - b) Students could discuss any two from the following (or others as appropriate):
    - Use of service user transport services the has a sould provide service get to his appointment. This would reduce he goographical, physical and However, the hospital may face the ling amitations in providing such a sermeet the necessary constitution.
    - Request rei be a man of travel expenses as Derek is on a low income element are paid back. However up front (and may have to wait a while to receive the money backessary eligibility criteria to have his expenses paid.
    - Use of courtesy wheelchair or mobility scooter in the hospital due to the f
      his legs, using a mobility scooter or wheelchair might help Derek get around
      arrange to use this equipment, or may not want to as he is used to being ab
    - Use of lift and ramps rather than stairs these adaptations to the hospital
      problems, such as Derek, get around the service more easily. However, for
      clearly signposted.
    - Use of grab rails along stairs and corridors similarly to the above, grab rails mobility walk around the service more easily. However, these will not be all (and instead would benefit from something such as a wheelchair or many contents.)

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### **B1** checking my understanding questions

- 1. Core skills for health and social care identified by Skills for Care:
  - English
  - Number
  - Digital
  - Employability
- In health and social care, problem-solving entails addressing complex issues, such a
  dementia patient by collaboratively analysing triggers, implementing innovative int
  evaluating and adjusting the care plan for optimal outcomes.
- Ahmed has used the skill of observation in noticing that an cirily service user's specification in specific properties.
- 4. Students may choose any three explains a sealing with difficult situations in health such as dealing with emotionally used service users or specific such as delivers

Other page e.s. have

- Example to distressing sights, sounds and smells
- Wc gunsociable hours
- Working under pressure, such as due to understaffing or dealing with medical
- Lee's organisational skills will enable him to find the equipment and medication he
  with a service user who is experiencing a life-threatening event. This will increase the
  and speedy recovery.
- Attributes are specific to a person or an object and can be described as their characters.
   Students may include any of the four attributes empathy, patience, trustworthiness a definition or an example of its use in practice.
  - Empathy is the ability to imagine yourself in someone else's situation.
  - Patience is giving others time for example, enough time for a service user to
  - Trustworthiness is a foundation of health and social care work as service users confidentiality at a vulnerable time.
  - Honesty enables health and social care workers to acknowledge limits of expensions vital for the safety of service users.
- Students may explain the importance of empathy by giving a definition or one or more care practice. More detailed answers may include that empathy must be balanced continue to work effectively in sometimes distressing situations.
- 8. 'Patience is a virtue' means that patience is a good attribute, and it relates to health foster good relationships with service users and colleagues. Patience is needed for supporting service users to achieve new skills and independence.
- Trustworthiness is the attribute of being seen to he task to sonduct oneself profess maintaining confidentiality. This is partically be swant in health and social care
- 10. Honesty is important for the etrical well-being of service users, visitors and colleven in difficult sit to such as questioning an instruction or admitting an error have a someth are unsure of.

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### Answers to B2 checking my understanding questions

- The 6Cs in health and social care are core values introduced in the government strategy.
   Practice' in 2016. This was a response to failings in care. The 6Cs are: care, compassion commitment, courage and communication.
- 2. Students may suggest any two examples of care in health and social care, such as:
  - Showing concern if a service user is subdued
  - Taking time to attend to all needs, not just the basics
  - Showing empathy, involving the service user and the family in care decisions
- 3. Students may suggest a range of ways that a compassionate approach will help Eric
  - Helping Eric with distressing symptoms, such as by proximing good pain relief
  - Providing emotional support for Eric and the far my
  - Listening to their concerns
  - Providing information for providing viso to contact out of hours
- 4. Sergei a need to work competently (showing research-based knowledge) as her the best chance of survival and speedy recovery. By being competent, the parawhich will help them to provide the correct on-the-spot treatment and to assist hos Marion's collapse and provide appropriate further treatment.
- Communication with service users with impaired hearing students may link to str
  - Speaking more clearly and slowly
  - Providing a quieter space to reduce background noise
  - Ensuring hearing aids are worn (for example, care home resident)
  - Using written information
  - Enable lip-reading or use of BSL interpreter
- 6. Students may link to Learning Outcome A content to provide any three examples of learning disabilities understands their options for treatment. These include:
  - Easy reading patient booklets
  - Use of a support worker, a relative or an advocate to discuss options with the
  - Use of information in a health passport to better understand how best to com
- 7. Courage means doing the right thing even at some personal cost.

A whistle-blower is a person who has flagged up poor practices, particularly in situal management has been ineffective in dealing with the issue.

- The sorts of issues in health and social care which require courage to tackle and sor inadequate staffing levels or equipment, poor practices, staff becoming exhausted
- 9. Commitment is included as one of the 6Cs as this is a few to improve care and the Commitment helps to drive forward improvement as services and encourages innovation.
- Josie is demonstrating he with next to improving care at the care home by taking problem, setting a plan for improving the service but action. It is next inspection. This is a good start in improving the service but action. It is next inspection met with some resistance and some changes to maintain her commitment to drive change and improve care at the care home to

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### Answers to B3 checking my understanding questions

- Obstacles to accessing health and social care are personal to an individual and block or taking action is prevented or difficult.
- 2. A mental health issue such as agoraphobia makes engagement with health and social ways, including anxiety and lack of confidence about approaching services; for example difficulty attending appointments, and difficulty in complying with treatment, such pharmacy. Unfortunately, lack of confidence, stigma and embarrassment can delay health issues such as agoraphobia from accessing the support they need from health.
- 3. A person with time constraints due to work and family/caring commitments may fine medical appointments due to competing demands on their time. This can lead to we in an emergency.
- 4. Two main sources of funding for thails a
  - General taxation
  - National Insura เอกเอนน์ons
- 5. Insuffice using for health and social care services can lead to a reduction in state stay with the reduced budget. Reduced staff raises the workload for remaining state care and increase waiting times for services.
- 6. High demand for health or social services puts pressure on service users and staff. \$\infty\$ following consequences:
  - Service users will wait longer to be seen, possibly experiencing physical or emediatressing symptoms.
  - There may be a move towards more remote consultations to increase through
  - This benefits some service users but leaves others behind and perceiving the s
  - Staff are likely to feel pressured, leading to higher turnover and absences.
- 7. Any individual who does not have friends or family to call on to help for example, operation or to provide day-to-day practical and emotional support will find it most for example, to agree to an operation. People who are socially isolated are more at as lack of support impacts well-being (compared to people who have the support of the sup
- People who have an addiction face a daily struggle as the addiction becomes their for chaotic. As finances, health and relationships are all impacted by addiction, people organise and attend appointments, to secure the care and support they need, and
- Mary is likely to find the bouts of vertigo unpleasant and exhausting, reducing her entered the day centre. She may worry about being taken ill while travelling or attending the This could increase her isolation and impact her physical and mental health.
- 10. Advantages of setting achievable goals:
  - Service users will gain confidence and impro\_\_\_\_\_\_\_and well-being by achie
  - This is also rewarding for health and commistaff to be part of.

Disadvantages of setting act will ble cars

- Achievable goal is off in baby steps', so the final target may take a long time
- He social care professionals may have had to move on to other service whener the goals have been achieved.

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### Answers to B4 checking my understanding questions

- Any two benefits of helping service users to overcome their personal obstacles (study or generally):
  - The service user overcoming fear of leaving the house
  - Improvements to physical and mental health of the service user
  - Reduced isolation

Students may note benefits to staff such as: increased job satisfaction, problem-solve addressing barriers.

- 2. a) John's independence has been promoted as the downstairs room will remove to his room easily when he wants to.
  - b) To fully ensure quality of care, person-centred care. A har's ability to be in from the support of an independent advocate would be able to it John being distressed about strugg! A the wairs) and push for John to be keeping the support of the
- 3. Discrimination is unlawful ചെയ്യും and upsetting, whereas practices which prome help to ensure evantable convex the health and social care support they need.
- 4. Student suggest an example of respectful behaviour of their own, or draw of following suggestions:
  - Treating someone as an individual, with individual needs, helps to provide effe
  - Not using offensive terms will avoid making people feel uncomfortable or insuling
  - Using appropriate forms of address or language indicates that you are respect are communicating politely or effectively.
- 5. Students can provide any suitable answer about promoting empowerment and indetent the following ideas:
  - Promoting empowerment and independence can build self-esteem, confidence
    of control.
  - There is also the opportunity to build on or learn new skills.
- Safeguarding refers to making sure that service users are physically and emotionally negligence and ensuring that the care environment is safe and healthy.
- 7. **Definition:** Neglect is failing to meet someone's needs for physical and mental heal

Students may give some of the following for explanations of the impact of neglect of as appropriate):

- Lowered self-esteem and confidence for example, by not giving the appropria
  hygiene tasks, someone's sense of self-worth may be lowered and they may for
  public or socialising with others.
- Risk of infection and health problems for example, neglect can include not en right medication. If they do not do so, they are at greater risk of physical healt
- Weight loss or gain by not providing the service user with an adequate diet to someone may not be able to maintain a healthy weight.
- Risk of injury, e.g. trips and falls for example, Lof plans to take care of the physics, there may be a higher number of heards in the area.
- 8. This we can they feel safe to do so without recrimination; complaints can be communicated between service users and staff (who can learn a lot from complaint and procedures; can help to prevent future harm and improve the service.
- 9. Confidentiality means keeping service user information private and secure. Student
  - Not discussing service users outside of work
  - · Storing electronic records securely via passwords
  - · Locking away paper records
- Explaining the procedure for the service user to access their medical records protections are user to read the records. However, there are some exceptions, e.g. informations user may be withheld.

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