

Y11 – Y12

BTEC Extended Diploma (x3) in Health and Social Care

Summer Independent Learning

Instructions:

These tasks are for students who will be studying the ***Extended Diploma in Health and Social Care*** (this is the equivalent of three A Levels so you will not be studying other subjects).

You have 3 tasks to complete. **ALL** tasks are **compulsory** and you will be expected to **provide evidence** that you have completed all tasks in your first lesson in September. Your work can be hand written or word processed.

1. Subject tasks – Unit 1, Unit 5, Unit 6 and Unit 11.
 - Time to complete: 15 hours
2. All About Me task.
3. Study Skills task.
 - On the 'Study Skills SIL' tab on the website.

Your first assessment in September will be based on the work you have completed for **Unit 1**.

Unit 1 – Human Lifespan Development

What will I be studying?

Health and social care practitioners need to develop a knowledge base for working with people in every stage of their lives, and they need to know how their own experiences relate to health and wellbeing. Although it is generally accepted that there may be deterioration in health with age following adulthood, medical intervention means people are living longer and have better life prospects.

This unit will develop your knowledge and understanding of patterns of human growth and development. You will explore the key aspects of growth and development, and the experience of health and wellbeing. You will learn about factors that can influence human growth, development and human health. Some of these are inherited and some are acquired through environmental, social or financial factors during our lifespan. You will learn about a number of theories and models to explain and interpret behaviour through the human lifespan. In this unit, you will explore the impact of both predictable and unpredictable life events, and recognise how they impact on individuals. You will study the interaction between the physical and psychological factors of the ageing process, and how this affects confidence and self-esteem, which in turn may determine how individuals will view their remaining years.

How will I be assessed?

A written exam in January 2023.

Name:

Key terms

It is important to be able to use key vocabulary in your exam answers. Use the internet to find definitions for the following key terms:



Key Word	Definition
Lifespan	
Growth	
Development	
Socialisation	
Maturation	
Physical development	
Intellectual development	
Emotional development	
Social development	
Environmental	
Socio-economical	
Nurture	
Nature	

Name:

Growth and development

Read the information about the principles of growth and development and then complete the tasks.

Principles of growth

Growth describes an increase in quantity. For example, children grow taller as they get older. As height increases, so does weight – this is referred to as a process of growth. Although growth is continuous, the rate is not smooth. There can be periods of more rapid growth in infancy and again during puberty which means there can be quite a difference between the rates of growth of two people who are the same age. There are also differences in the growth rates of boys and girls. Growth rates also vary in different parts of the body, for example the head circumference grows more rapidly than other areas in the first months of life. When referring to growth it is important to consider two dimensions:

- ▶ weight
- ▶ length/height.

At birth and then between six to eight weeks, a baby's head circumference will be measured to check the size and growth of the brain.

Infants grow rapidly during the first six months of their lives. Healthy newborns double their birth weight by four to five months, and triple it by the time they reach a year old. By the age of two, a healthy infant will be approximately half their adult height. Not only can growth measurements help a health visitor to monitor a child's health and development, they can also identify other issues for example if an infant is under- or overweight or growing too slowly. Infants will grow on average about 12 cm (4 inches) and gain about 2.5 kg (5 lbs) between one and two years of age. Between their second and third birthday, an infant will gain another 2 kg (4 lbs) and grow about 8 cm (3 inches) more. A health visitor will carry out the measurements and plot the results on a growth chart to ensure that an infant is meeting their milestones.

Principles of development

Development describes changes that might be complex and involve ability levels altering.

Development happens:

- ▶ from head to toe – an infant will first be able to control their head, then develop control over their body to enable them to sit and finally have control over their legs and feet to allow them to crawl and eventually walk
- ▶ from the inside to the outside – an infant learns to control movements in their body first then in their arms and legs until, finally, they can control the small muscles in their fingers
- ▶ in the same sequence but at different rates
- ▶ holistically – areas of development are dependent on and influence each other.

Development can be seen as a journey. As the journey progresses, children reach a number of key **milestones**. These are also referred to as **developmental norms** and describe the skills that infants, children and adolescents are expected to develop at particular ages or stages of their life. These norms include walking, talking or tying shoe laces. The four main areas of skills acquisition are:

- 1 physical – gross and fine motor skills
- 2 social development
- 3 emotional development
- 4 intellectual development and language skills.

Although children will pass through the same developmental stages, you should remember that every child is unique and develops at their own rate. Norms help professionals describe an average set of expectations. If a child develops faster than the norm it does not necessarily mean that the child is 'gifted'. Neither does it mean that there is something wrong if a child develops more slowly.

Very few people experience their life in 'compartments' labelled 'physical', 'intellectual' 'emotional' or 'social'. Most people experience physical, intellectual, emotional and social development holistically. For instance, the development of a child's social skills is dependent upon the development of their intellectual and language skills. One developmental aspect cannot be assessed without looking at the other aspects. Developmental milestones provide a useful guide for professionals and enable them to recognise, monitor and take appropriate action if development is delayed in one or more of developmental areas.

Name:



Task 1: Answer the questions to check your understanding:

1. Explain what is meant by a 'process of growth'.
2. During which life stages is growth most rapid?
3. What dimensions do we need to consider when referring to growth?
4. When and why is a baby's head circumference measured?
5. By what age will a healthy infant be half of their adult height?
6. What can growth measurements help a Health Visitor to identify?
7. Outline the 4 ways that development happens.
8. Why is development seen as a 'journey'? (Include the terms 'milestones' and 'developmental norms' in your answer.)
9. What are the four main areas of skills acquisition?
10. Why is every child unique?
11. What is meant by holistic development?
12. Why are developmental milestones useful for professionals?

Task 2: Research the role of a Health Visitor – who are they and what do they do?

- You could present your work as a poster / spider diagram.

Task 3: Find out when most children would be able to:

- run forwards and backwards
- button and unbutton clothing
- write their own name
- use joined-up writing
- walk in a straight line
- turn the pages of a book

For each example, say whether it is a gross motor skill or a fine motor skill.

Name:

Life stages

Use the internet to find examples of development in each life stage. (You may be able to think of examples from your own development too!)

Life stage	Examples of physical, intellectual, emotional and social development
<ul style="list-style-type: none">• Birth and Infancy• (0-2 years)	P I E S
<ul style="list-style-type: none">• Childhood• (3-8 years)	P I E S
<ul style="list-style-type: none">• Adolescence• (9-18 years)	P I E S
<ul style="list-style-type: none">• Early Adulthood• (19 - 45 years)	P I E

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	S
<ul style="list-style-type: none"> • Middle Adulthood • (46 - 65 years) 	P I E S
<ul style="list-style-type: none"> • Late adulthood • (65+ years) 	P I E S

Name:

Physical development in adolescence - puberty

Read about the physical changes associated with puberty below and then produce a leaflet explaining these changes for Year 6 pupils at a local primary school.

Development of primary and secondary sexual characteristics

Puberty takes place over several years. It is a period of rapid change and growth and is experienced by both females and males. Table 1.3 shows some primary and secondary sexual characteristics for both sexes. Primary sexual characteristics relate to the changes and development of reproductive organs, while secondary characteristics are outward signs of development from a child into a man or woman.

which a young person develops from a child into an adult.

► **Table 1.3** Primary and secondary sexual characteristics

Primary sexual characteristics (present at birth and develop during puberty)		Secondary sexual characteristics (develop during puberty)	
Female	Male	Female	Male
The uterus enlarges and the vagina lengthens.	Enlargement of penis and testes.	Breasts develop and the areola (the area around the nipple) swells and darkens.	Changes in larynx (Adam's apple) causing voice to deepen.
The ovaries begin to release eggs.	Spontaneous erections caused by blood flowing into chambers in the penis may happen.	Hair grows in armpits and pubic area.	Hair grows in armpits and pubic area, facial hair.
The menstrual cycle commences.	The testicles begin to produce spermatozoa (sperm), beginning of ejaculation.	Redistribution of body fat causing hips to widen.	Redistribution of muscle tissue and fat.

Key terms

Puberty – a period of rapid growth during which young people reach sexual maturity, and become biologically able to reproduce and secondary sexual characteristics develop.

Hormones – chemical substances produced in the body and transported in the blood stream that control or regulate body cells or body organs. For example, the sex hormones produced by the ovaries and testes are responsible for the development of secondary sexual characteristics in puberty.

Puberty in girls often starts between the ages of 11 and 13 although it may begin earlier. Boys generally start puberty later, often between 13 and 15 years of age. Puberty is a development stage that prepares the body for sexual reproduction. It is triggered by the action of **hormones** that control sexual development. Both boys and girls may experience a 'growth spurt' when they grow taller at a faster rate than before.

The role of hormones in sexual maturity

Sex hormones are responsible for the changes that occur in puberty. The pituitary gland controls the release of sex hormones in both females and males. The release of sex hormones controls the onset and rate of puberty, the physical changes such as pubic and axillary hair growth and egg and sperm production. It can prove to be a difficult time emotionally for young people as levels of hormones going up or down often cause mood swings.

The main female hormones are oestrogen and progesterone. The ovaries start to produce oestrogen and progesterone which are responsible for changes including ovulation and menstruation. The first period is a significant, notable change for young females as it indicates the onset of fertility.

The main male hormone is testosterone. The testes start to produce testosterone which stimulates sperm production, indicating the onset of fertility. Testosterone is also responsible for the development of secondary sexual characteristics such as a deeper pitch and tone of the voice.

Name:

Intellectual development - Piaget's model

Read the article: [Jean Piaget's Theory and Stages of Cognitive Development | Simply Psychology](#)

Watch the video clips:

Object permanence: [\(202\) Piaget - Object permanence failure \(Sensorimotor Stage\) - YouTube](#) - Can you explain why the infant doesn't look for their toy?

Conservation: [\(202\) A typical child on Piaget's conservation tasks - YouTube](#)

Egocentrism: [\(202\) Piaget - Egocentrism and Perspective Taking \(Preoperational and Concrete Operational Stages\) - YouTube](#)

Complete the table:

Stage	What is happening to cognitive development?
Sensorimotor (Birth - 2 years)	Include object permanence
Pre-operational (2 - 7 years)	Include lack of conservation and egocentrism
Concrete operational (7 - 11 years)	Include concrete logical thinking
Formal operational (11 - 18 years)	Include abstract logical thinking

The development of schemas

An important aspect of Piaget's cognitive development theory was the notion that children go through a series of stages of intellectual development. He referred to these stages as schemas. According to Piaget, a schema is a category of knowledge as well as the process of acquiring knowledge. A child develops concepts about the world around them (a state of **equilibrium**). As they experience situations where new information is presented, their schemas are upset and they reach a state of **disequilibrium**. As the new information is **accommodated**, the original schemas are modified or changed so they again reach a stage of equilibrium. For example, Jack is two years old and loves walking near the farm in his village to see the animals in the fields. Jack has developed a schema for a cow. He knows that a cow is large, has four legs and a tail. When Jack sees a horse for the first time he might initially call it a cow as it fits with his schema of a large animal. Once Jack has been told that the horse is a different animal, he will modify his existing schema for a cow and create a new schema for a horse.

What do you think will happen the first time that Jack sees a miniature horse? He could mistakenly identify it as a dog unless someone explains that the animal is actually a very small horse. He must modify his existing schema for a horse to include the fact that while some horses are very large animals, others can be very small.

Key terms

Equilibrium – a state of cognitive balance when a child's experience is in line with what they understand.

Disequilibrium – a state of cognitive in balance between experience and what is understood.

Accommodation – modifying schemas (concepts) in relation to new information and experiences.

Schemas - make some notes on schemas here. Include a brief outline of what Piaget meant by *equilibrium*, *disequilibrium* and *accommodation*.

Emotional development - Bowlby's monotropy theory

Use the internet to research Bowlby's monotropic theory of attachment and design a poster to answer the following questions:

- **What** is meant by 'attachment'?
- **Who** do we form an attachment to?
- **When** do we need to form an attachment by?
- **How** do we form an attachment?
- **Why** do we form an attachment?

Remember to include where your information is from (copy the website addresses).

Genetics

Each living cell in the human body has a nucleus containing 23 pairs of chromosomes. In each pair of chromosomes, one comes from the father and one from the mother. Each chromosome carries units of inheritance known as genes, and these genes interact to create a new set of instructions for making a new person. Genes, for example, determine the colour of your eyes and hair and whether you will be short or tall.

Genes are made of a substance called deoxyribonucleic acid (DNA). DNA contains the instructions for producing proteins. It is these proteins that regulate the development of a human being.

Human Lifespan Development

Learning aim B



Genetic predispositions to particular conditions

A predisposition is the possibility that you will develop a certain condition. A **genetic predisposition** means that you inherit that possibility from one or both of your biological parents. However, a genetic predisposition does not mean that it is a certainty that you will develop that condition. Although the genetic makeup that predisposes these conditions cannot be altered, we can sometimes alter environmental factors and offer support and treatment to allow the individuals to develop and lead life as healthily as possible. There are some inherited conditions, some rarer than others, that have serious consequences for a child's growth and development.

Key term

Genetic predisposition

- inherited genes that determine physical growth, development, health and appearance.

Choose a condition, from the list below, to find out about:

- Cystic fibrosis
- Brittle bone disease
- PKU



Record yourself presenting the findings. You could either video yourself or do a voice recording over a PowerPoint presentation.

Unit 5 – Meeting Individual Care and Support Needs

What will I be studying?

For you to be able to provide the care and support that individuals need, it is important that you have a good understanding of the principles behind providing quality care and support. This unit introduces you to the values and issues that need to be considered when planning care and support that meet the needs of an individual in a health and social care environment.

In this unit, you will learn about the values and principles of meeting care and support needs and look at some of the ethical issues that arise when personalising care. You will examine factors that can impact the professionals who provide the care and support, and the challenges that must be overcome to allow access to good quality care and health services. You will explore the different methods used by professionals across all care services. You will reflect on these methods when you consider the importance of multi-agency working in providing a package of care and support that meets all the needs of individuals.

This unit will be useful if you are intending to pursue a career in social care or healthcare, for instance as a social worker or health visitors, practice nurse or occupational therapist. The unit will also be invaluable if you wish to progress to higher education, to degrees in areas such as health and social care management, social work and nursing.

How will I be assessed?

Two coursework tasks.

Name:

Video links you need to complete the tasks

All links do work however you may need to copy and paste them into your web browser.

Topic	Task	Watched video clip/s (✓)	Completed worksheet (✓)
1. Equality and diversity	Watch the video clip and then complete worksheet 1 https://www.youtube.com/watch?v=Q6eqOBOqESM		
2. Skills – listening	Watch the video clip and then complete worksheet 2 https://ed.ted.com/best_of_web/foptnjVE#watch		
3. Empathy	Watch the video clip and then complete worksheet 3 https://ed.ted.com/best_of_web/sFgrZpHc#watch		
4. Legislation – Human Rights Act 1998	Watch the video clip and then complete worksheet 4 https://www.youtube.com/watch?v=BOc-fpC1bak		
5. Personalised care	Watch the video clip and then complete worksheet 5 https://www.youtube.com/watch?v=RXOd-7rn6so		
6. Multi-disciplinary working	Watch the video clip and then complete worksheet 6 https://www.youtube.com/watch?v=bENp2ImhORw		
7. Confidentiality	Watch the video clip and then complete worksheet 7 https://www.youtube.com/watch?v=ngErlvzGNE		
8. Managing personal information	Watch the video clip and then complete worksheet 8 https://www.youtube.com/watch?v=xbVfzMSZtJ8		

Extra Task! Click on the link below to complete the 5 minutes quiz and find your NHS career

<https://www.healthcareers.nhs.uk/FindYourCareer>

Name:

Worksheet 1: Equality and Diversity

Draw a line between the term on the left and the correct definition on the right.

Term		Definition
Principle		Treating a person or group of people differently from others
Value		All being treated fairly so can access services of equal quality that meet their personal needs
Skills		A strongly held opinion stored in the subconscious mind
Quality		A judgement of what is important in life on which we base our actions and behaviour
Equality		An unreasonable feeling against a person or group of people
Diversity		The beliefs, language, style of dress, ways of cooking, religion, ways of behaving etc. shared by a particular group of people
Discrimination		A basic belief as to how to behave that underpins all our actions
Belief		A personal attribute or characteristic that is part of an individual's personality
Culture		The ability to do something well
Prejudice		A variety or range of differences

- Did you know all these definitions or did you have to guess some of them?
- Try covering up the right-hand column and see if you can remember each definition.
- Without looking at the answers, write down and explain the difference between **discrimination** and **prejudice**.



Name:

Worksheet 2: Skills – listening

1. What is 'active listening'?

2. What does the process of active listening involve?

3. Try the activity below with a family member.

Reflect

Work with a partner and decide who will be the speaker and who will be the listener. The speaker should tell the listener about a recent visit to a health care service, such as the dentist or doctor. They should talk for three minutes. The person listening must listen carefully and they are not allowed to take any notes or to interrupt. The listener has to repeat what they have heard. The listener must then reflect on how well they feel they have listened. The speaker will then feed back whether they agree or not, and say why. The speaker then reflects on whether they spoke clearly and used appropriate language so that the listener could understand what was being said. Swap and repeat the activity, this time taking the other role. Do you think that you could have been a better listener and/or speaker?

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Worksheet 3: Empathy

Further reading:

<https://www.psychologytoday.com/gb/basics/empathy>

<https://www.healthwatch.co.uk/blog/2019-03-13/four-ways-empathy-can-improve-patient-care>

Challenge! <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3411203/>

[How empathic are you? Complete the quiz to find out!](#)

<https://psychology-tools.com/test/empathy-quotient>



Poster task! Design a poster to explain what empathy is. Use examples to show why empathy is important in health and social care settings.

Worksheet 4: Legislation – Human Rights Act 1998

- The Human Rights Act originated in the European Convention of Human Rights after World War 2.
- The UK incorporated this into the Human Rights Act which became law in 2000
- Citizens who feel their human rights have been violated can apply for a judicial review in the British courts and a judge will decide if a public authority has acted illegally. Alternatively an individual can simply sue the public authority concerned for damages if he/she feels their human rights have been violated.
- The Human rights Act does not override other national laws. All courts can do is make a 'declaration of incompatibility' which may encourage the relevant government to change the law to bring it in line with the Human Rights Act.

The articles of the Human Rights Act

Below is a list of the main articles of the Human Rights Act. Under each one try to think of an example of something which would violate that article of the Human Rights Act.

A summary of the main articles

Article 2: The right to life

E.g. The UK government cannot send a person back for trial to another country where they could face the death penalty.

Article 3: Prohibition of torture

Article 4: Prohibition of slavery and forced labour

Article 5: The right to liberty and security

Article 6: Right to a fair trial

Article 7: No punishment without law

Article 8: Right to respect for private and family life

Article 9: Freedom of thought, conscience and religion

Name:

Article 10: Freedom of expression

Article 11: Freedom of association and assembly

Article 12: The right to marry and found a family

Article 14: Prohibition of discrimination

Some of these rights are qualified. This means that the government can restrict these rights under certain circumstances. The government would have to show there was a legal basis for the restriction or interference and that its actions were necessary and proportionate. (E.g., a group of people who assembled to start a riot or commit a violent act could be dispersed by the police who could argue that this was a valid legal restriction on the right to freedom of association and assembly.)

Conflicting human rights

Sometimes the rights of two groups conflict in terms of the Act and courts may have to decide which set of rights to uphold. Consider the following examples and decide whose rights you would support.

Case A

A group of animal rights protestors have been demonstrating outside a research establishment which does experiments on animals. They have also found the home addresses of some of the scientists who work there and have on occasions demonstrated outside their homes. They argue that they have the rights to freedom of expression (Article 10) and freedom of assembly (Article 11). The scientists argue that they have the right to privacy and home (Article 8) and try to persuade the police to stop the protests.

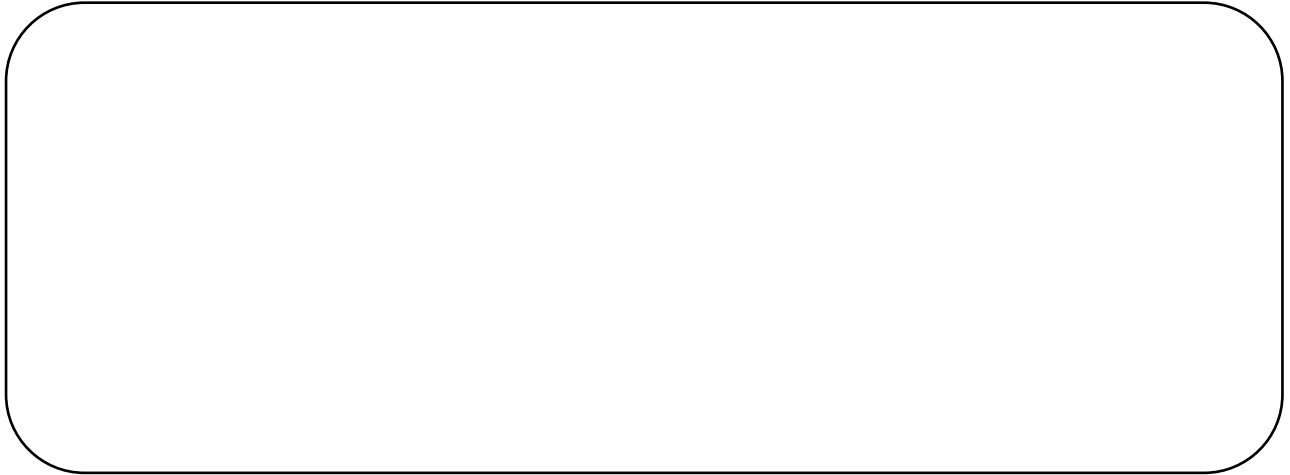
Case B

An evangelical Christian couple own a hotel. They strongly believe that homosexuality is forbidden by the bible and have imposed a ban on gay people staying in their hotel. They claim that this is their right under Article 9 (Freedom of thought, conscience and religion). A

Name:

gay couple seek to challenge this ban in the courts, claiming that it amounts to a form of discrimination contrary to Article 14.

Note down your ideas about these two cases below:

A large, empty rounded rectangular box with a thin black border, intended for students to write their ideas about the cases mentioned above.

Some ways that the Human Rights Act has been applied to healthcare in the UK:

- Elderly and vulnerable patients who were badly mistreated in an NHS hospital were given justice (and some compensation) after a public inquiry found there was a failure of the NHS system at every level;
- Patients have the right to determine what is in their best interests;
- Medical staff can't ignore parents' objections to the treatment of their children;
- Hospitals must protect vulnerable patients at risk of suicide; and
- People detained because of their mental health have legally enforceable rights.

Name:

Worksheet 5: Personalised care

Click on the link below to read the article and then answer the following questions.

<https://www.england.nhs.uk/ourwork/patient-participation/patient-centred/planning/>

1. What is personalised care and support planning?

2. What are the benefits of personalised care and support planning?

3. Is there a set template for what a personalised care and support plan should look like?

4. Summarise the 5 criteria that a personalised care and support plan must meet.

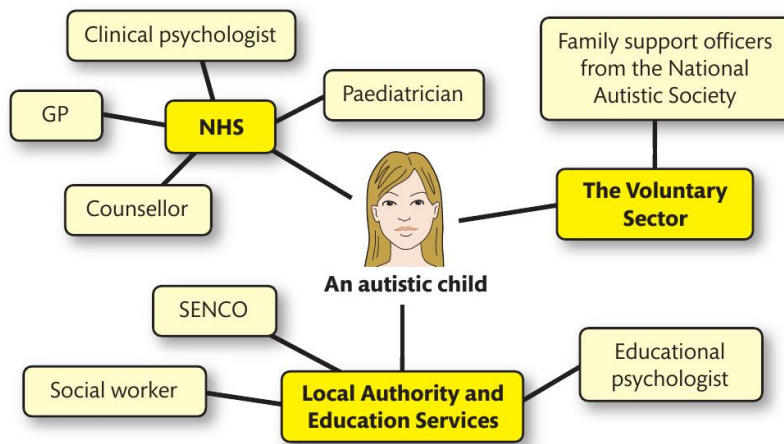
5. Identify the 3 key features of a personalised care and support plan.

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Worksheet 6: Multi-disciplinary working

A multi-disciplinary team is made up of professionals from the **same** service who have **different roles**. These professionals work together to support an individual or a family facing complex situations. For example, for someone diagnosed with cancer, the team might be made up of an oncologist, a radiologist, a haematologist, a dietician, a clinical nurse specialist and other specialist nurses.

A multi-agency team is made up of professionals from **different** health and social care services. For example, a local authority service might work with NHS services and a charity to help support a service user.



Read the case study and answer the questions:

Case study

Maria's story

When Maria was 27 years old she was involved in a serious road traffic accident, and has to use a wheelchair. She is now 33 years old and stays at home to look after her 5-year-old son and 3-month-old daughter. Her husband Sven, works on a production line in a local factory and has just been diagnosed with bowel cancer. He needs radiotherapy and chemotherapy. Sven has been told that he may need

an operation later on and regular tests to make sure the cancer has not spread to other parts of his body.

Check your knowledge

- 1 How do you think Maria will be feeling?
- 2 What practical problems will the family now face?
- 3 How could a multi-disciplinary team of voluntary sector workers help them?

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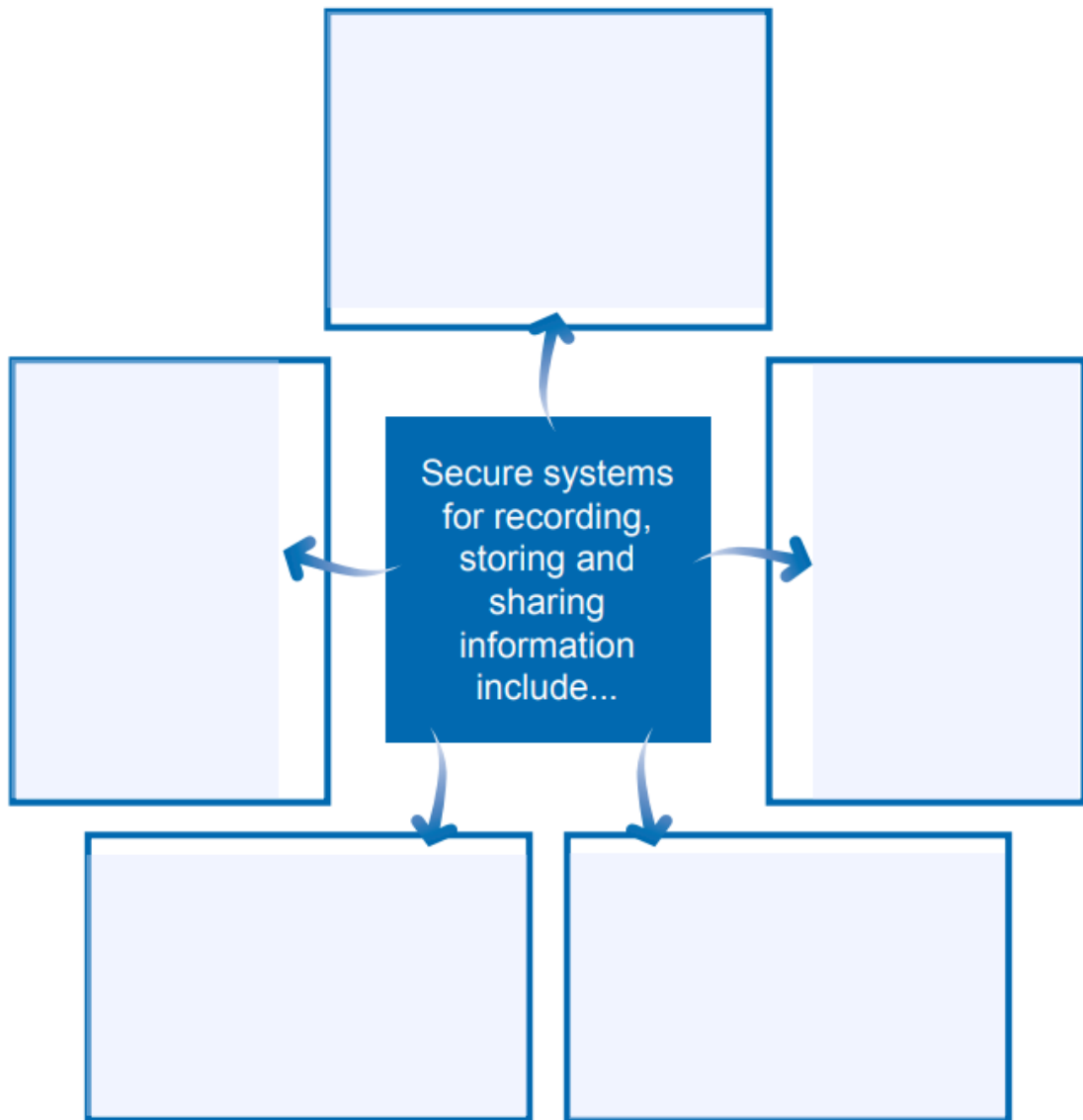
Worksheet 7: Confidentiality

Concerns about confidentiality led to the **Caldicott Report**, published in April 2013. Originally, there were seven principles however an eighth has been added since. Find out what the eight principles are and jot these down below.

Name:

Worksheet 8: Managing personal information

Research task! Find out about secure systems used for recording, storing and sharing information in health and social care settings and jot these down in the diagram below.



Name:

Answers:

Worksheet 1

Answers: Term		Definition
Principle		A basic belief as to how to behave that underpins all our actions
Value		A judgement of what is important in life on which we base our actions and behaviour
Skills		The ability to do something well
Quality		A personal attribute or characteristic that is part of an individual's personality
Equality		All being treated fairly so can access services of equal quality that meet their personal needs
Diversity		A variety or range of differences
Discrimination		Treating a person or group of people differently from others
Belief		A strongly held opinion stored in the subconscious mind
Culture		The beliefs, language, style of dress, ways of cooking, religion, ways of behaving etc shared by a particular group of people
Prejudice		An unreasonable feeling against a person or group of people

Unit 6: Work Experience in Health and Social Care

What will I be studying?

If you are thinking about a career in health and social care, then work experience is a good way of making you aware of the tasks and activities you may be required to carry out. This unit will help you reflect on and develop your personal attributes and skills required for work in this sector, and extend your knowledge and understanding of the responsibilities of health and social care professionals.

In this unit, you will learn about the benefits of work experience in health and social care. You will examine how work experience can help you to develop personal and professional skills, such as communication and teamwork, and to understand more about the expectations of different professional roles. You will develop a plan to support your learning in placement and you will monitor your progress with a reflective journal. This is a practical unit which will support your work experience placement in health and social care and provide a foundation for you to develop, apply and reflect on knowledge and skills in a realistic situation.

A work experience placement will prepare you for further study in a variety of higher education programmes. It is often a requirement for progression to higher education, and is a component of degree courses in the sector such as social work or nursing.

How will I be assessed?

Two coursework tasks and 100 hours of work placement.



Name:

About You

1. Have you completed any work experience?
(Please circle)

Yes

No



If you said 'yes' then please complete Q2 & Q3. If you said 'no' then please skip to Q4.

2. What was your job role, what setting did this experience take place in, and what were your duties?
3. What skills and qualities did you develop from this experience?
4. You will complete work experience as part of the course. Think about where you would like to do work experience and what sort of tasks you would like to get involved in.

Name:

Key terms

Find out what the following key terms mean. It is important that you can use the key terms in your coursework.



Key Word	Definition
Hazards	
Active listening	
Safeguarding	
Equality	
Diversity	
Confidentiality	
Dignity	
Disclosure and Barring Service (DBS)	
Person-centred Approach	
Reflective Practice	
Policy	
Procedures	

Name:

Health Promotion	
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Name:

Risk Assessment

To complete the risk assessment, choose a room in your house, your local park, or another outdoor setting. You need to identify hazards that can potentially harm others and complete the table below. An example hazard has been completed for you below based on a school trip to support you.

What are the hazards?	Who Is At Risk	How can this cause harm?	What control measures could be used to minimise the risk?
1. Slips, Trips & Falls	Students & Staff	Uneven floors, spills, obstacles, lack of housekeeping, cleaning methods – causing injuries, bruising, fractures.	Students shall be advised of hazards at commencement of trip. Provider shall ensure the premises are in a safe condition, with good standards of housekeeping. Rules of work areas should be clearly stated at commencement, and adhered to.
2.			
3.			
4.			
5.			
6.			

Key legislations

Use the internet to find out about the following key pieces of legislation (the Law). Jot down the key points in the table below.

Legislation/regulations	Key points
Health and Safety at Work Act 1974	
Control of Substances Hazardous to Health (COSHH) Regulations 2002	
Food Safety Act 1990	
Food Safety (General Food Hygiene) Regulations 1995	
Manual Handling Operations Regulations 1992	



Legislation/regulations	Key points
<p>Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 1995</p>	
<p>Data Protection Act 2018 with GDPR</p>	
<p>Management of Health and Safety at Work Regulations 1999</p>	

Unit 11: Psychological Perspectives

What will I be studying?

An important aspect of working in the health and social care sector is to have a good understanding of the ways in which psychological development occurs in order to effectively meet the individual needs of service users. Having knowledge of the key concepts and ideas enables you to understand the ways in which development and behaviours occur.

In this unit, you will learn about the different psychological perspectives that have been put forward and how these approaches have influenced thinking and practices in meeting and supporting service user needs. You will explore some key ideas that will give you a good understanding of how the mind develops, and the factors that influence development and behaviours. This knowledge is useful in developing your understanding of how these perspectives have formed the basis of different techniques to manage behaviours, and the therapeutic and other interventions used in the health and social care sector. These activities will help you gain the skills necessary for progression to higher education in many subject areas including psychology, health and social care, nursing and medical practice.

How will I be assessed?

Two coursework tasks

Unit 11 – Psychological Perspectives

Psychology is the scientific study of mind and behaviour. A psychological approach, or perspective, looks at how human behaviour can be explained. Most psychologists would agree there is no one right approach and each has its own strengths and weaknesses which allow health and social care workers to understand human behaviour.

1. The Behaviourist Perspective

We are born knowing nothing and learn as we go on.

We are born “blank” and it is our environment which shapes us, makes us who we are. We learn from parents, friends, TV and much more.

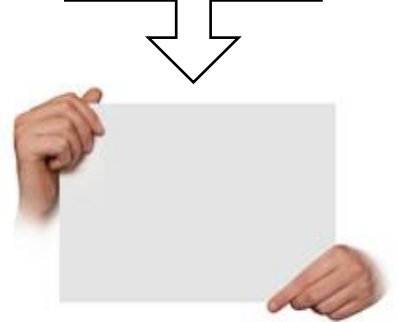
We learn EVERYTHING from our environment (this is called Environmental Determinism)

All that we are is because of our environment. Our personalities and behaviour is ***determined by our environment***.

We learn through pairing one this with something else this is called association.

Behaviourists believe that the behaviour of people and animals is the result of stimulus-response relationships. The stimulus is the thing that starts the reactions, the response is the reaction. For example, if you touch and burn your hand on the hob (stimulus) and therefore pull your hand away (response). You will not touch the hob in future and therefore have learned by associating the hob with pain.

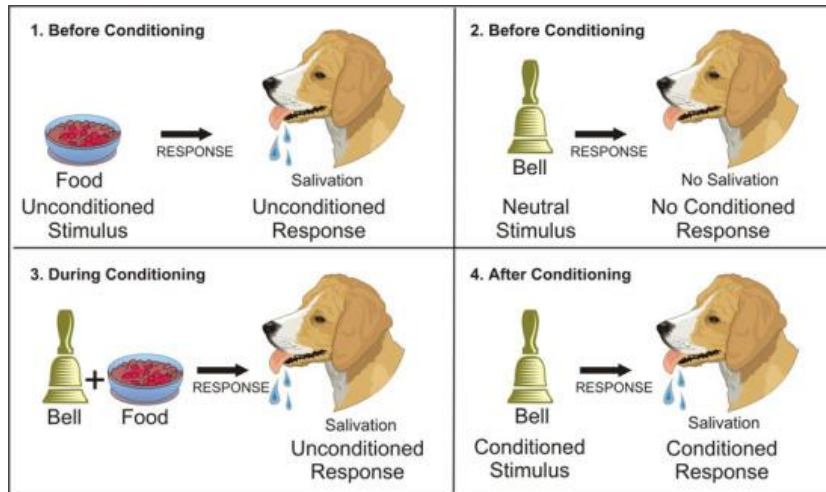
Tabula Rasa
meaning 'blank
slate'



Classical Conditioning

Classical conditioning was developed from the work of Ivan Pavlov, a physiologist who was initially interested in digestion in dogs. His initial experiments were to look at the salivation response and underlying mechanisms, to see if different stimuli produced different levels of salivation. He believed salivation was an automatic reflex. However, he almost accidentally stumbled upon classical conditioning because his experiments kept failing!





Classical Conditioning

Read the info and watch the YouTube video at <https://www.simplypsychology.org/pavlov.html> and make notes on classical conditioning:

Classical conditioning relies on building an **ASSOCIATION** between a **NEUTRAL STIMULUS** and an existing **UNCONDITIONED STIMULUS**

A Neutral Stimulus is...

An Unconditioned Stimulus is...

The neutral stimulus is **presented simultaneously** with the _____ stimulus. Eventually, the unconditioned stimulus can be removed and the previously neutral stimulus will cause the same _____. This is now the **CONDITIONED RESPONSE**. Because the previously neutral stimulus now elicits this response, it is now called the **CONDITIONED STIMULUS**.

Operant Conditioning

Operant conditioning was developed by **B.F. Skinner** and he believed that internal thoughts and motivations could not be used to explain behavior. Instead, he suggested, we should look only at the external, observable causes of human behavior.

Operant conditioning is a method of learning that occurs through rewards and punishments for behavior. Through operant conditioning, an association is made between a behavior and a consequence for that behavior.

Skinner used the term ***operant*** to refer to any "active behavior that operates upon the environment to generate consequences" (1953). In other words, Skinner's theory explained how we acquire the range of learned behaviors we exhibit each and every day.

Read the info on <https://www.simplypsychology.org/operant-conditioning.html> and make notes on the following:

Positive reinforcement

Negative reinforcement

Punishment

Skinner Box

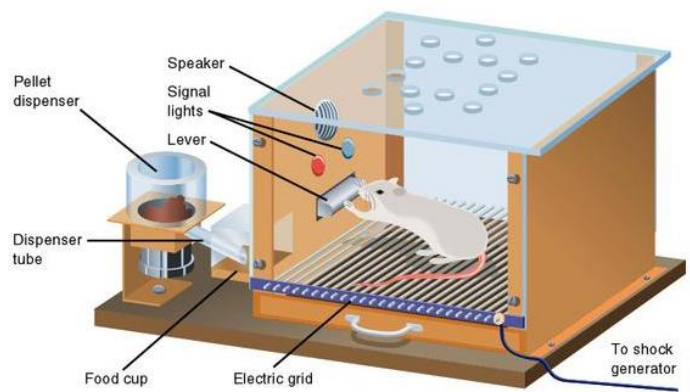
Skinner developed this device for investigating operant conditioning under tightly controlled conditions.

The basic Skinner box consisted of a lever, food delivery chute, and a signal light. A rat was placed in the box with nothing else. When a rat accidentally pressed the lever a food pellet was delivered. After this had happened a few times, the rat had learned how to get food.



Explain how the Skinner box supports the mechanisms of operant conditioning.

Remember to use the terms **positive reinforcement**, **negative reinforcement** and **punishment** in your explanation.



2. Social Learning Theory

Social learning theory is the view that people **learn by observing others**. Associated with Albert Bandura's work in the 1960s, Social Learning Theory (SLT) explains how people learn new behaviours, values, and attitudes. For example, a teenager might learn slang by observing peers. Social learning requires paying **attention** to the person(s) observed, **remembering** the observed behaviour, the ability to **replicate** the behaviour, and a **motivation** to act the same way.

Can you think of any other examples where we might learn behaviours from other people?

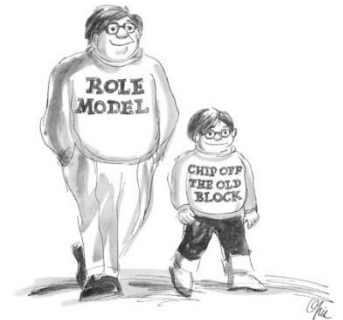
Role Models



Activity: Think of two of your role models. They can be past or present, famous or not famous. Think about how they have influenced your behaviour.

My role model is...

How did they influence me?



Everybody has a few people who have influenced us for better or worse, these are called **role models** and are a very important concept in **Social Learning Theory**. Although we learn new behaviours from many people, the way we perceive a person depends on whether their behaviour is modelled or copied. Models can be peers, family, colleagues or celebrities. SLT says these people are important and we look to them in order to **learn how to behave**.

The work of Albert Bandura

Social learning theory is supported by the work of Albert Bandura and the study of 'models'. The theory states we learn from people we are exposed to and can also learn new behaviours from people we observe in real life or in the media which is entitled observational learning.

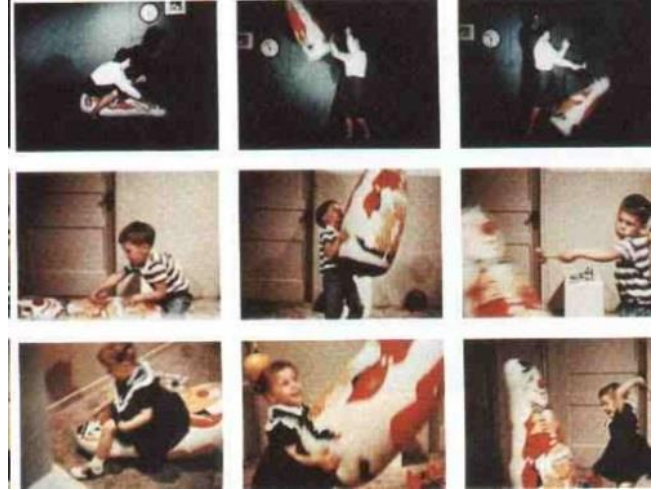
The people we learn from are known as **models** and when a person *imitates* it this is known as modelling. If we see a model being punished for a certain sort of behaviour a person is *less* likely to copy it. If we see a model being rewarded for their behaviour then we are *more* likely to copy it. Bandura

carried out a series of experiments



called the **Bobo Doll Experiments** to

help test if children could learn aggressive behaviour through social learning theory.



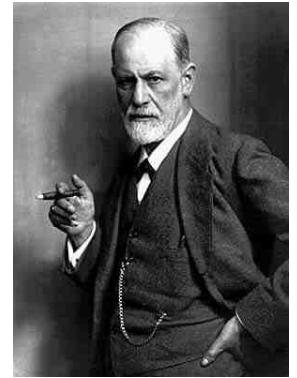
ACTIVITY: Watch the clip on and make notes below on this experiment.

<http://www.youtube.com/watch?v=zerCK0IRjp8>

The Bobo doll experiment

3. The Psychodynamic Approach

This approach is associated with the Austrian psychologist **Sigmund Freud** and is completely different from the approaches you have learned so far. Its key assumption is that human behaviour is driven by thoughts, feelings, emotions and drives from **the unconscious part of our mind**.



ACTIVITY: Write down what you think the **MIND** is



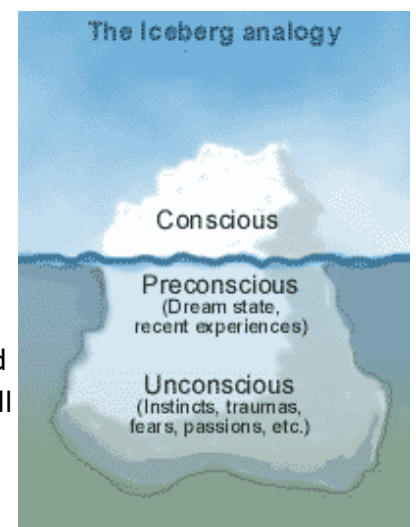
The importance of the unconscious mind

Freud was one of the earliest psychologists to suggest that we are not always aware of all aspects of ourselves. He suggested that what we were aware of is represented in our **conscious mind**. But many of our feelings, memories and past experiences are locked up in a part of our mind called the '**unconscious**'.

We cannot access the contents of our unconscious mind but they often 'leak out' in dreams and in slips of the tongue (known as **Freudian slips**).

Freud said that our mind is like an **iceberg**. The section which is above water is your **conscious** and it contains things like memories and current perceptions. We can mentally access this conscious at any time, such as remembering what you did last Tuesday. However the piece which is important is the **unconscious**. Freud said this was the section of iceberg which was underwater.

Freud believed that it was the **unconscious** part of the mind which had the most influence on our behaviour. This part of the mind contains all our fears, emotions, wishes, desires and repressed memories.



Freud believed that the mind had a massive influence on our behaviour, in particular the unconscious mind. He also suggested that the mind, or **psyche**, is divided into 3 parts; the **id**, the **ego** and the **superego**.

Make notes on the following parts of the mind using info at <https://www.simplypsychology.org/psyche.html>

The Id

The Ego

The Superego

Psychosexual Stages of development

Freud believed that what happens to us during early childhood has a massive influence on our adult behaviour. Freud believed that in early childhood up until puberty we all go through several **psychosexual stages of development**. At each stage a person's **libido** (energy) focuses its energy on a particular area of the body that is relevant at the stage in their childhood. If the needs are met in that stage then it can move onto the next stage. If there is a struggle or conflict or some unsatisfactory experience then the person becomes **fixated**, that is they become 'stuck' in that stage, they are reluctant to move to the next stage. If they become fixated in a stage then this will result in them developing certain personality traits in adulthood.

4. The Humanistic Perspective

Humanistic psychology looks at human experience from the viewpoint of the **individual**. It focuses on the idea of **free will** and the belief that we are capable of making choices. This approach values human experiences and the individual. They believe that each person is **unique** and must be treated as such.

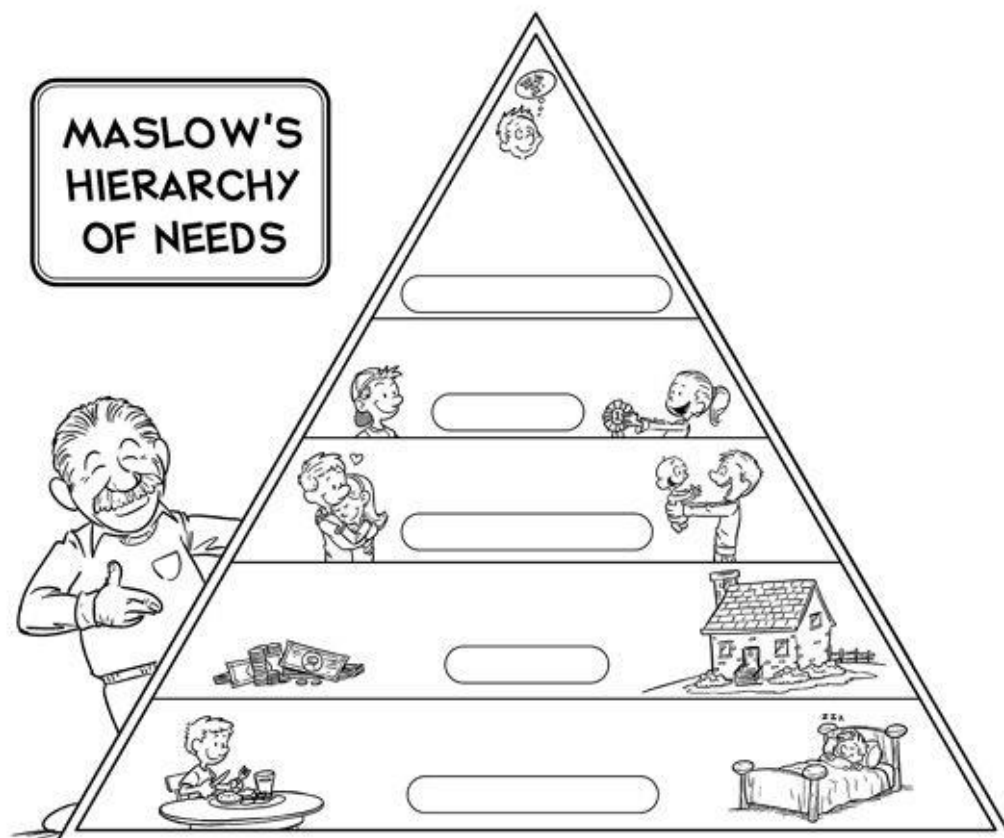
This approach is commonly associated with counsellors who sit down with someone and talk about their experiences. Two of the biggest Psychologists in this field are **Carl Rogers** and **Abraham Maslow**.

Maslow's hierarchy of needs

Maslow (1908-1970) was an American psychologist who believed that we are all seeking to become the best we can possibly be spiritually, emotionally, intellectually and physically. He called this **self-actualisation**. He came up with a theory known as the **hierarchy of needs** which suggests that every human requires basic human needs to be met.



Research Maslow's hierarchy of needs on the internet and fill in the pyramid below, labelling each level of need and giving examples of how those needs are met:



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Maslow believes that in order to self-actualise we need to meet all of the lower needs, such as food and safety. If one of these needs isn't met then we are unable to progress further to the next level until we have met that need. A homeless man cannot get a job because he cannot meet his basic physical needs in the first level of the pyramid which are to feed himself and sleep soundly in a safe environment like a house. Until our basic physiological needs are met then we will focus all of our energies on getting them met. When we are well-housed, well-fed and comfortable physically then we begin to focus on our emotional needs such as the need to belong and feel loved and to feel **self-esteem**.



The problem	Need not being met
Clients of a day centre are well looked after, but the scruffy, untidy building with its peeling grey paint seems to make everyone feel depressed.	
Charlie has been living on the streets since he ran away from home three months ago. He is dirty, exhausted and hungry.	

Carl Rogers

Humanistic psychology believes that people have free will. People are basically good, and have an innate need to make themselves and the world better and Rogers also believed that we also hold a concept of self; this is called the **ideal self**.

Read the info and watch the YouTube video at <https://www.simplypsychology.org/self-concept.html> and make notes on **self-concept**, **ideal self** and **incongruence**:



5. Cognitive/information processing approach

Piaget's Stages of development

Piaget looked at children's cognitive abilities. He said that our cognitive abilities develop over time, becoming more sophisticated and complex. These were put into stages.

<https://www.simplypsychology.org/piaget.html>

<u>Stage</u>	<u>Age</u>	<u>Features</u>	<u>Example</u>
Sensorimotor	0 – 2 years	Children explore the world through their senses and motor activity (movement).	Children learn to move around at this stage for example walking and grasping objects. They often pick things up and put them in their mouths to explore them.
Pre –operational			
Concrete operational			
Formal operational			

6. The Biological Perspective

Arnold Gesell & Maturational theory

Maturational theory believes a child does not develop due to a maturing environment, rather a child is born with a genetic code passed down from their parents. This approach believes a person's development is linked to nature, with the environment having very little effect if any on development.

Research **Arnold Gesell** and make notes on his maturation theory below:

<https://www.tutor2u.net/hsc/reference/maturation-theory-gesell>

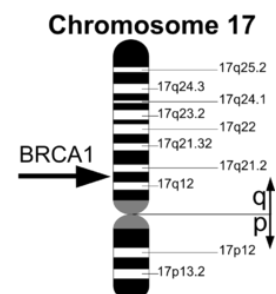
Genetic influences on behaviour

This part of the theory concentrates on how **genetics** can cause physical and mental illnesses and therefore influence our behaviour. Many studies of genetic conditions have been done on twins; with both identical twins being more likely to be affected by a genetic disorder than non-identical twins.

One example of a genetically inherited illness is **Huntington's disease**. This occurs when a parent passes on a single dormant gene to their children. This leads to physical problems followed by psychological problems and eventually leading to dementia. The biological approach argues that this type of disorder will develop regardless of other influences in a person's life such as their environment.



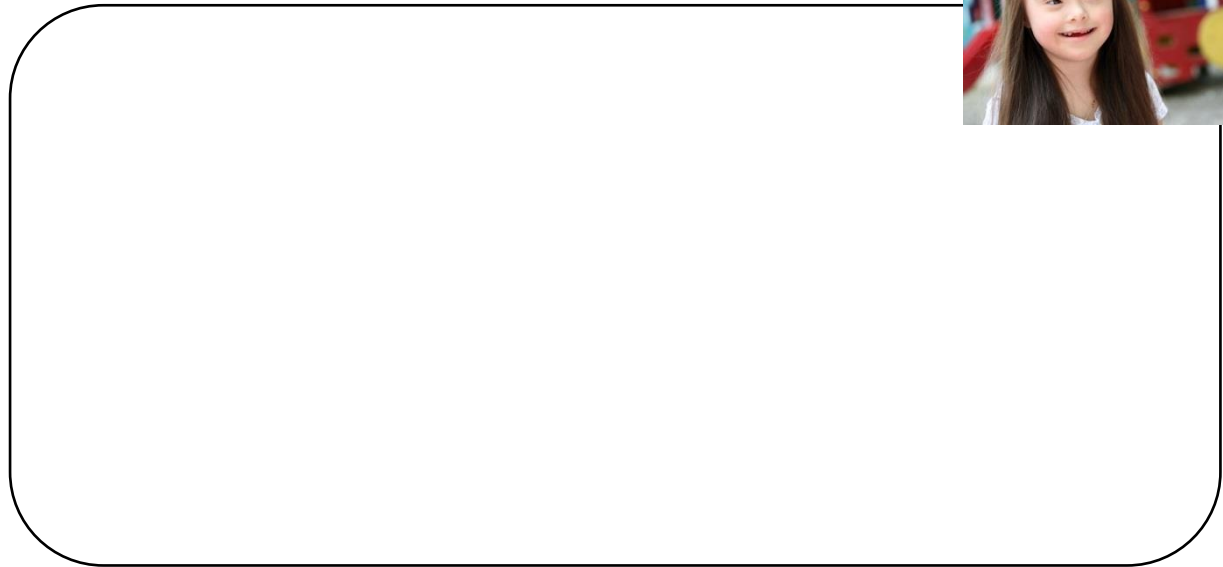
ACTIVITY: Find out about the genetic component in susceptibility to breast cancer.



Not all illnesses that have a genetic influence are hereditary. For example, **Down's Syndrome** is one of the most common, non-inherited genetic syndromes.

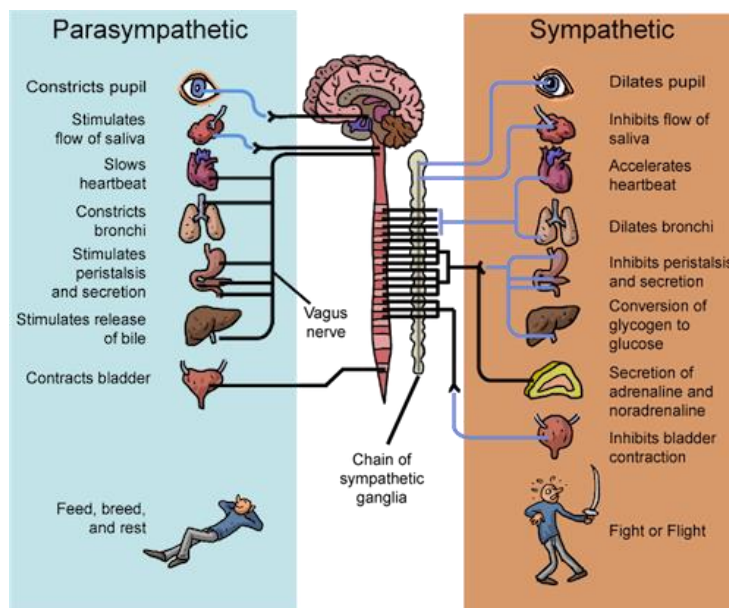


ACTIVITY: Find out about the genetic cause of Down's Syndrome.



The influence of the nervous and endocrine systems on behaviour

The **autonomic nervous system** (ANS) is part of the nervous system and it controls many organs and muscles within the body. One of its main roles is to stimulate the release of hormones. Hormones are chemical substances that act like messenger molecules in the body they travel to different sites to control how cells and organs do their work. Different parts of the ANS can influence behaviour. For example the **sympathetic branch** and **parasympathetic branch** of the autonomic nervous system is responsible for our '**Fight or Flight**' responses.



In stressful situations your sympathetic branch uses energy reserves, your blood pressure increases, your heart beats faster, and digestion slows down this allows a person to respond to different situations. The parasympathetic branch restores you back to normal and aims to save energy by decreasing blood pressure, slowing down your heart beats and allowing digestion to start.

What physical symptoms may a person have during a stressful situation?

What effects does adrenaline have on our body?