

***CLEETHORPES ACADEMY
HOME LEARNING
Summer Term***

***Year 10: HEALTH AND SOCIAL
CARE***



We Are **CARING**

We Are **CURIOUS**

We Are **CREATIVE**

SELF QUIZZING

OUR EXPECTATIONS

- The act of self-quizzing supports retrieval. Retrieval is important because the more we revisit knowledge and ideas, the more likely we are to remember it. The more we remember, the greater sense we can make of our learning.
- You should spend a minimum of *30 minutes a night* focusing on a specific subject's retrieval activity.
- You should bring your completed work to form, every Tuesday, where your work will be checked and additional retrieval activities will be completed to support your retention of the information studied at home.
- Failure to complete the activities each week, will result in further sanctions.

WHAT YOU SHOULD DO

- Each night, select a subject to focus on.
- Read the subject's information really trying hard to remember what you have read. You might want to highlight and add your own notes to the information you have been given.
- Once you are confident that you can recall the information without having to recheck, use the following blank page to write down everything you can remember, using a black or blue pen. Don't worry if you can't remember everything
- In form time, your tutor will ask you to check through your work and use a green pen to "gap fill" any information you may have missed.
- Your tutor will also ask further questions in relation to the information you have read each week, to further support your retention of new knowledge.
- You will be rewarded with carrot points for your efforts each week.

WEEK 1

Consultation is the process of discussing care with a service user in order to get their opinion or offer advice so that a shared decision can be made

Consultation can take place with:



The service user themselves if they are able to understand



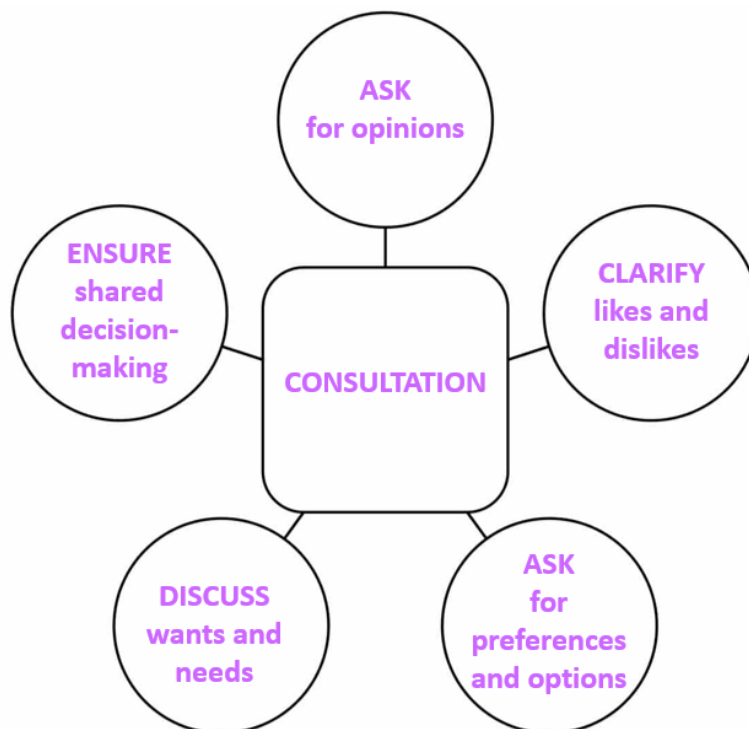
A service user's representative such as family member or friend



A service user's representative in the form of an advocate

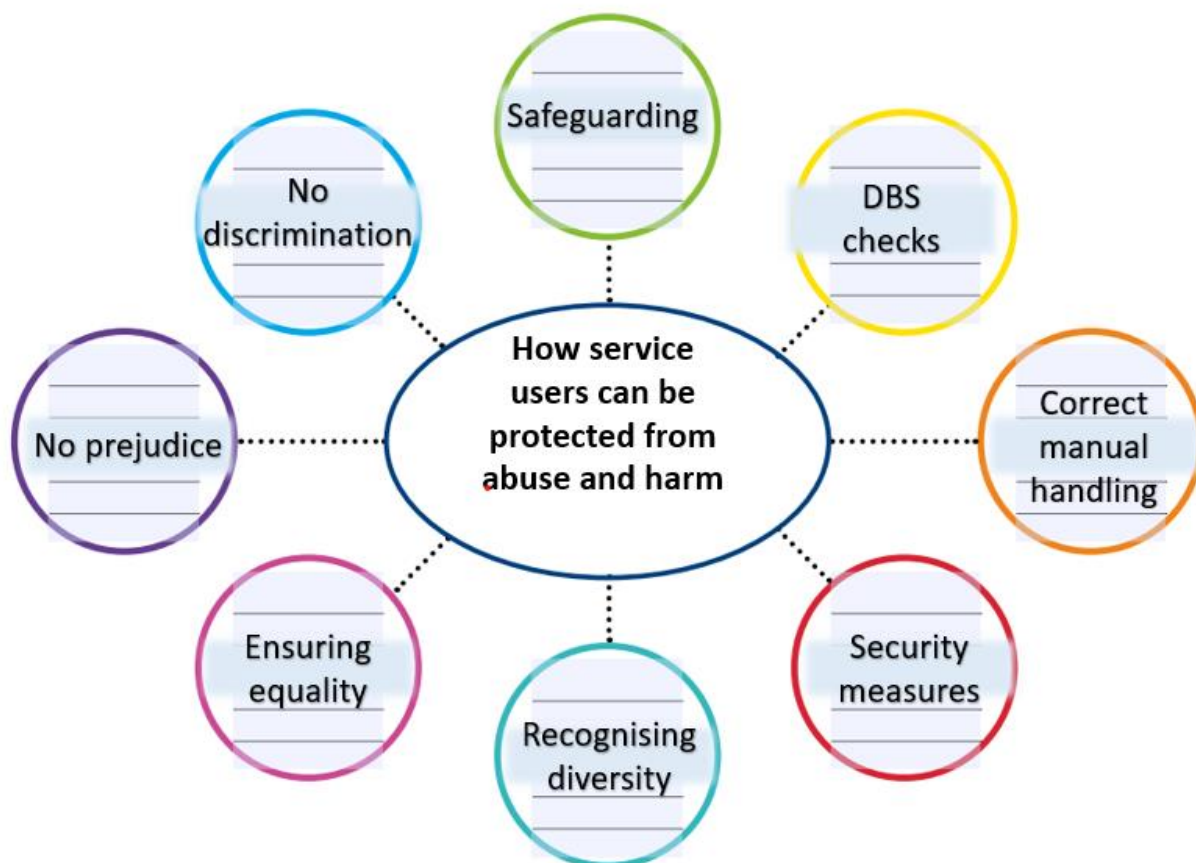
Tie

-
-



Week 2

How can health and social care services protect people from abuse and harm?



Week 3

Equal and fair treatment in health and social care

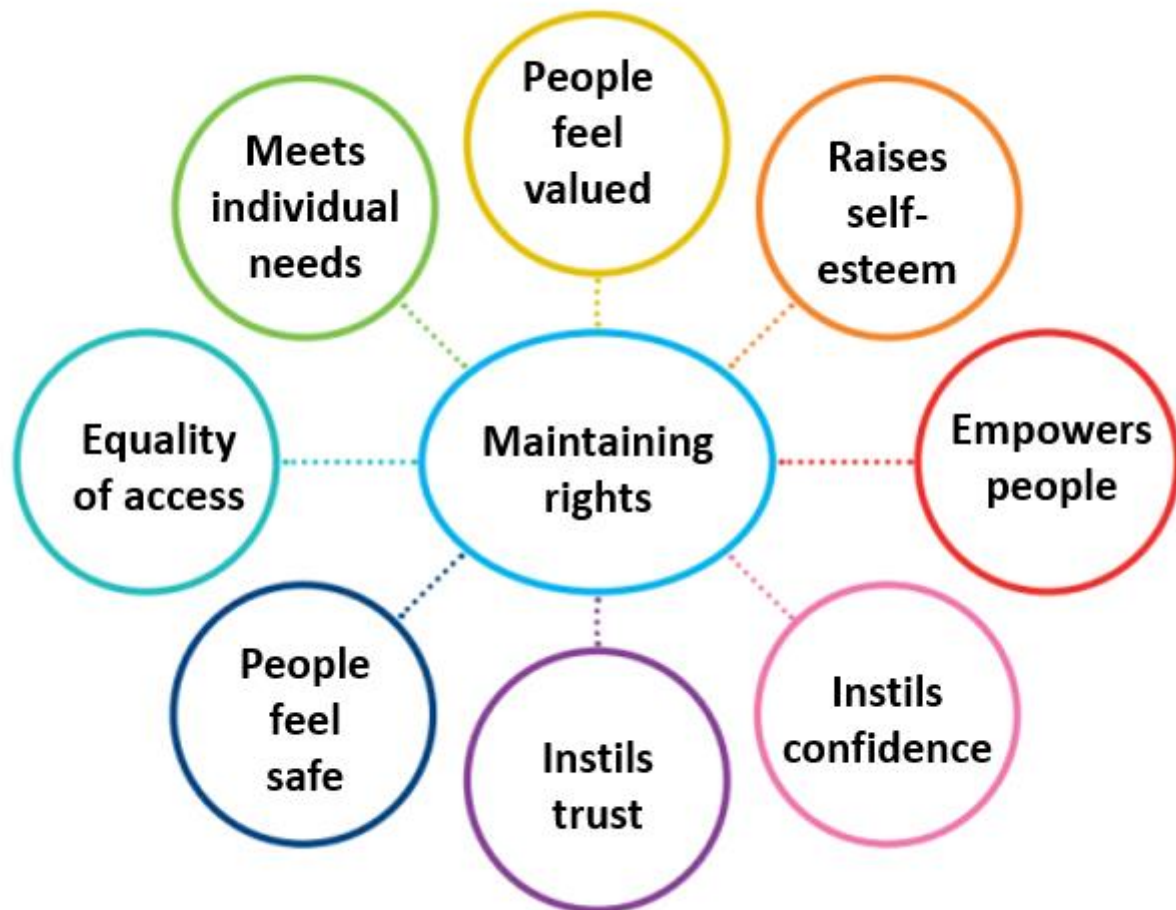
- **Equal treatment** means being given the **same opportunities and choices as everyone else**
- **Fair treatment** means being able to have **full access** to those opportunities and choices, as well as receiving the type of care that meets **individual needs**

Here are specific examples of equal and fair treatment:

- **Communication Access:** Providing British Sign Language (BSL) interpreters, using hearing loops, providing information in Braille, or offering easy-read leaflets for those with learning disabilities.
- **Cultural and Religious Sensitivity:** Offering food options that comply with religious practices (e.g., Halal, Kosher) and allowing flexible, same-sex care providers to respect cultural preferences
- **Physical Accessibility:** Installing ramps, widening doors for wheelchairs, and ensuring accessible, adapted toilets and bathing facilities in care homes.
- **Individualised Care Plans:** Adapting care plans to accommodate specific needs, such as modifying routines for individuals with dementia or adjusting for, say, Parkinson's disease.
- **Equal Access to Services:** Ensuring mental health services are culturally appropriate for ethnic minorities or refugees, and providing targeted care for LGBTQ+ individuals.
- **Language Support:** Providing interpreters or translated materials for patients whose first language is not English to ensure they understand diagnoses and treatment options.
- **Flexible Scheduling:** Offering appointments at different times to accommodate working individuals or those with caregiving responsibilities.
- **Staff Training:** Implementing regular training to help staff recognize and mitigate implicit biases.

Week 4

Why it is important to maintain people's rights in health and social care



Week 5

What is person-centred care?

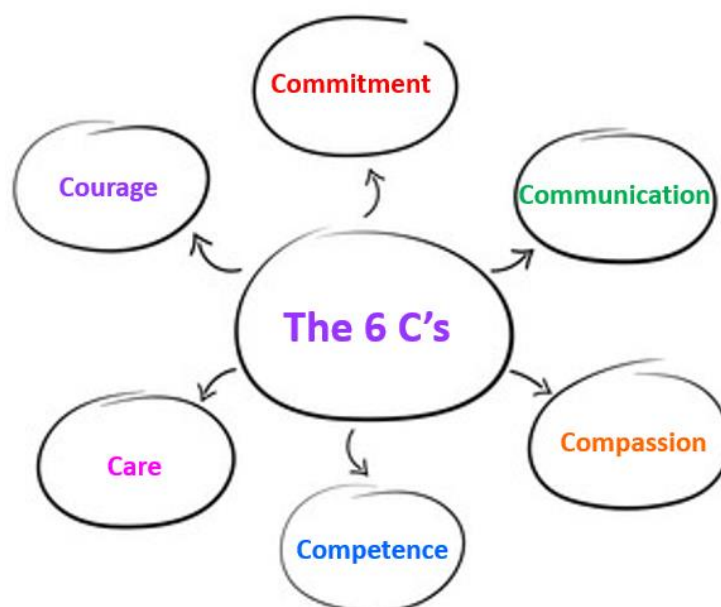
Being person-centred is about focusing care on the needs of individual. Ensuring that people's preferences, needs and values guide clinical decisions, and providing care that is respectful of and responsive to them. Health and wellbeing outcomes need to be co-produced by individuals and members of the workforce working in partnership. Evidence suggests that this provides better patient outcomes.

These are the Person-centred values:



Week 6

What are the 6 C's of health and social care?



Commitment: A dedication to providing high-quality care and continuously improving services

Communication: Ensuring clear, effective and respectful communication with patients, their families, and other healthcare professionals

Competence: Possessing the necessary skills, knowledge, and expertise to deliver safe and effective care

Compassion: Demonstrating empathy, kindness, and understanding towards patients and their families

Care: The fundamental principle of providing support and assistance to meet the needs of individuals

Courage: Having the bravery to speak up, advocate for patients, and challenge poor practice when necessary

Week 7



They have clear guidelines on the standards of care



They have their rights to choice and consultation supported



They experience job satisfaction



They can develop their skills



They can maintain and improve the quality of care they provide



They can share good practice

Ti

These are the benefits to service users if the person-centred values and 6 C's are applied

Effects of not applying the PCVs/6 C's:

- **Poor Health Outcomes:** When individual needs and preferences are ignored, treatments may be less effective, potentially leading to malnutrition, illness, or slower recovery.
- **Reduced Quality of Life:** A lack of, or inappropriate, care can cause individuals to become withdrawn, isolated, or feel excluded.
- **Loss of Dignity and Rights:** Neglecting personal values can result in people feeling treated as tasks rather than individuals, leading to a loss of independence and feelings of being disrespected.
- **Lowered Compliance and Engagement:** Individuals are less likely to adhere to care plans that they were not involved in creating.
- **Increased Costs and Inefficiency:** Inadequate care can lead to longer hospital stays and preventable readmissions, increasing overall healthcare costs.
- **Reduced Trust:** Patients may feel unsafe, neglected, or disrespected, destroying the crucial relationship between the person and the caregiver.

Week 8

Verbal communication methods:

- **Adapting type/method of communication**
- **Clarity**
- **Empathy**
- **Patience**
- **Using appropriate vocabulary**
- **Tone**
- **Volume**
- **Pace**
- **Willingness to contribute to team working**

Examples of non-verbal communication:

- **Facial Expressions:** Smiling to show happiness, frowning in disagreement, raising eyebrows to indicate surprise, or pursing lips when angry or deep in thought.
- **Body Language and Posture:** Crossing arms to signal defensiveness or discomfort, slouching to show boredom, or standing tall to project confidence.
- **Gestures:** Waving to greet someone, pointing for direction, or giving a "thumbs up".
- **Eye Contact:** Steady eye contact suggests interest and sincerity, while avoiding eye contact can indicate shyness or deception.
- **Touch (Haptics):** A firm handshake (professionalism), a pat on the back (support), or a hug (affection).
- **Space (Proxemics):** Standing close to someone implies intimacy, while keeping a distance may indicate a formal or professional relationship.

Week 9

What is active listening?



What is an advocate?

An advocate in health and social care is an independent professional or trained volunteer who supports individuals to express their views, understand their rights, and make informed decisions about their care. They act as a spokesperson for those who struggle to speak up, ensuring their voice is heard, especially during assessments, care planning, or complaints.

Week 10

Specialist methods of communication

<u>Method</u>	<u>Meaning</u>
Braille	A series of raised dots read by touch used by blind or visually impaired service users
BSL	Uses hands, facial expressions and gestures to make visual signs to communicate with deaf or hearing impaired service users
Hearing loop	A sound system used by people with hearing aids. Provides a wireless signal which reduces background noise
Interpreter	Converts spoken or signed message from one language to another
Makaton	Uses gestures alongside symbols/pictures and speech
PECS	Picture Exchange Communication System – uses pictures to aid communication to help children with autism
Translator	Converts written message from one language to another
Voice-activated software	Allows users to write text, send emails etc with their voice instead of a mouse or keyboard
Dynavox	Speech-generating software which uses a touch screen that contains pictures and symbols. These are then converted into speech
Lightwriter	A text-to-speech device where a message is typed on a keyboard and then displayed on screen & converted into speech

Week 11

What is safeguarding?

Protecting the health and wellbeing of individuals.

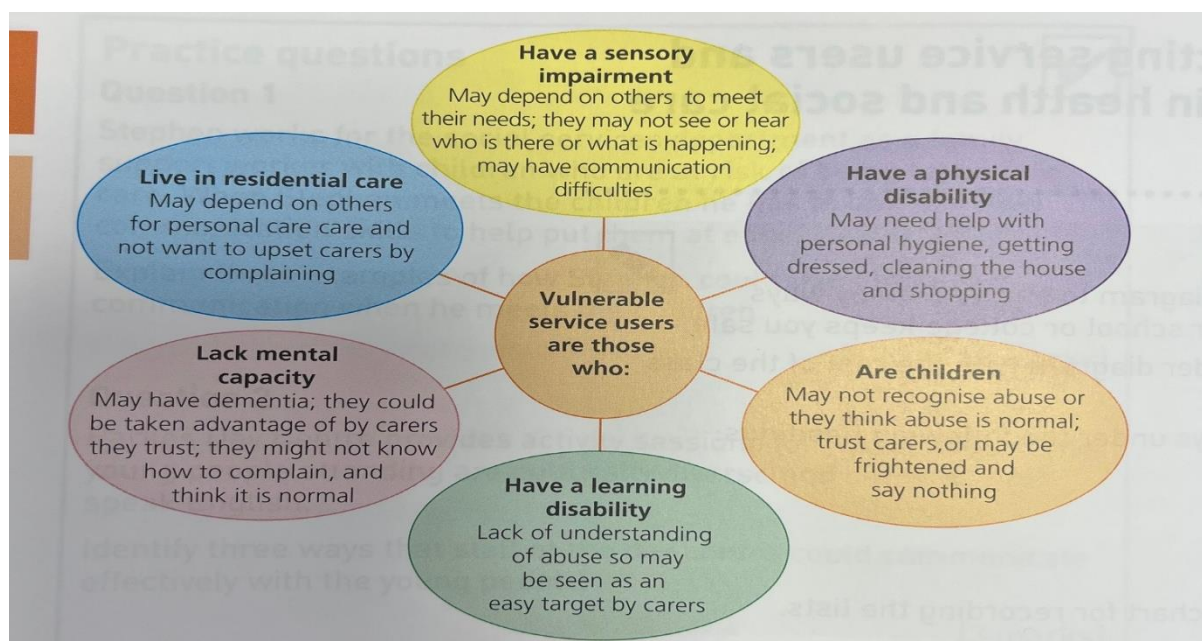
Making sure individuals are living free from harm, neglect or abuse.

In care settings, safeguarding means protecting service users from harm and abuse.

This could be from other people or from unsafe settings.

Harm can be accidental or deliberate

People who need safeguarding



Week 12

General cleanliness and personal hygiene in health and social care settings

- **General cleanliness** = maintaining a clean environment through regular cleaning and disinfection
- **Personal hygiene** = maintaining personal care and appearance to reduce the spread of infection

General cleanliness in health and social care settings:

- **Hand Hygiene:** Frequent, proper handwashing with soap and water or alcohol-based sanitizer is crucial, especially when hands are soiled or when caring for patients with gastrointestinal illnesses.
- **Personal Protective Equipment (PPE):** Gloves, aprons, and sometimes eye protection are necessary to manage the risk of contamination from blood or bodily fluids.
- **Waste and Laundry:** Clinical waste must be segregated and disposed of correctly, and linen handled to avoid spreading infections.
- **Spillages:** Blood or bodily fluid spills must be cleaned immediately using specialized kits (e.g., chlorine-based agents).

