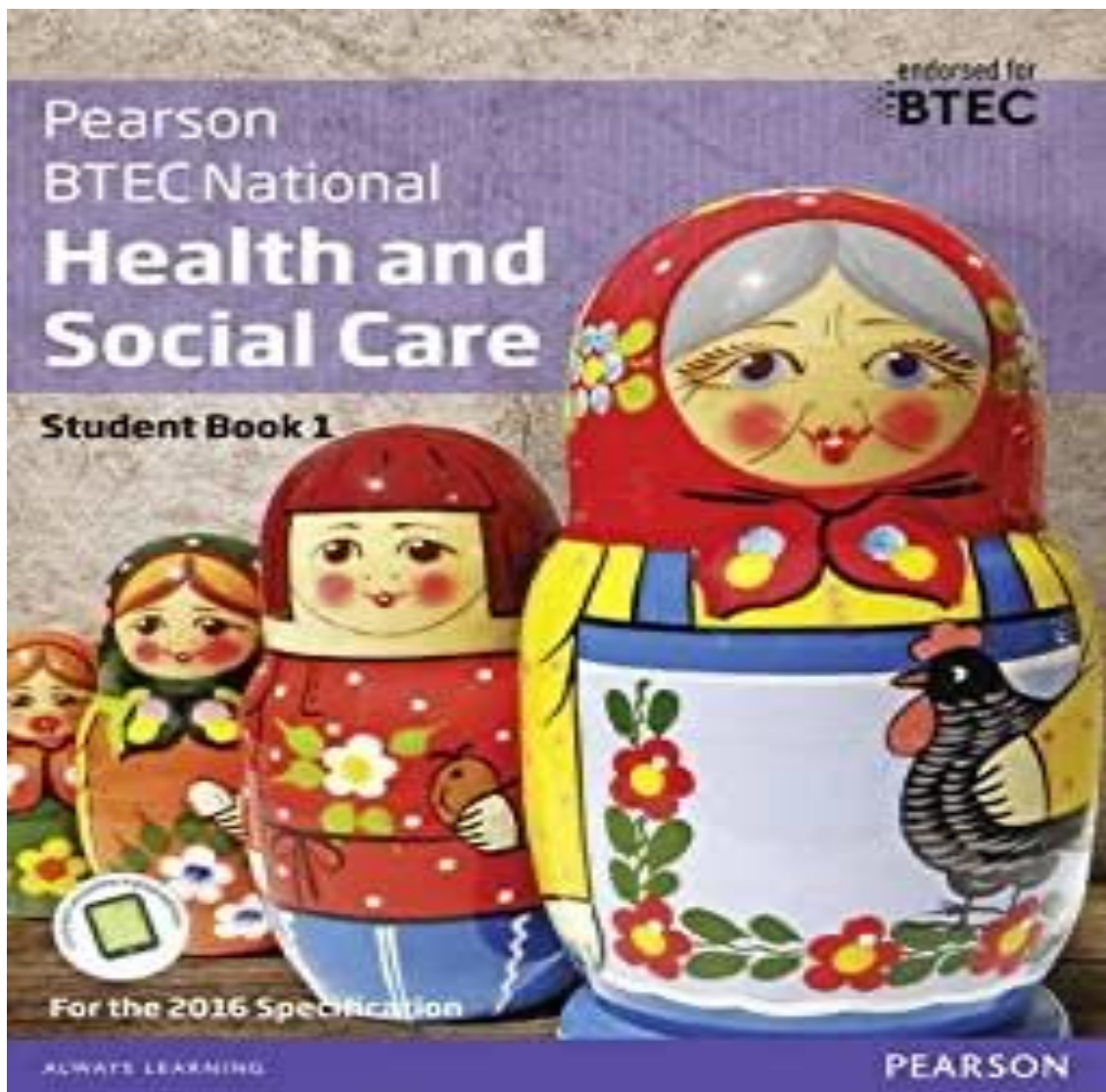


# Level 3 BTEC Extended Certificate Health and Social Care



Passport to Y13

Name: \_\_\_\_\_

# What will I be studying?

This course allows you an insight in the many roles available within health and social care from nurses to social workers to child care assistants and beyond they have many key features that we shall explore and apply. You will be studying a range of units which will help you to gain skills that will be valuable in your chosen profession or future study. You will learn about the human body and mind alongside the changes across time. You will learn what it means to work in the sector and what skills and behaviours you will need to develop. We will study the following units; although the final one is subject to change and you may not study them in this order.

During unit two, **Working in Health and Social Care**, you will focus on:

- You will be introduced to the roles and responsibilities of health and social care practitioners and the organisations they work for.
- You will see how a wide range of roles, including doctors, nurses, physiotherapists, occupational therapists, social workers, youth workers, care workers and other professionals, work together to ensure that the individual needs of vulnerable people are met.
- **How you will be assessed: this is a paper based exam that lasts for 1 hour 30 minutes and worth 80 marks. There will be four sections and include short- and long- answers. The questions are intended to assess your understanding of how health and care services who need professional support. Each section will relate to a different service user group, for example the frail elderly, people with learning disabilities, people with mental health problems or people with long-term illnesses.**

## **Instruction for SIL**

Below is the textbook chapters and revision guide, please use these to complete the tasks at the bottom of the document. You will be sitting a short knowledge test on the content in this document in your first lesson back.

Learning Aims	Unit Content	R	A	G
<b>A. The roles and responsibilities of people who work in the health and social care sector</b>	<p><b><i>A1. The roles of people who work in health and social care settings</i></b></p> <p><b><i>Understand the roles of people who work in health and social care settings</i></b></p> <ul style="list-style-type: none"> <li>• <i>Doctors</i></li> <li>• <i>Nurses</i></li> <li>• <i>Midwives</i></li> <li>• <i>Healthcare assistants</i></li> <li>• <i>Social workers</i></li> <li>• <i>Occupational therapists</i></li> <li>• <i>Youth workers</i></li> <li>• <i>Care managers/assistants</i></li> <li>• <i>Support workers</i></li> </ul>			
	<p><b><i>A2. The responsibilities of people who work in health and social care settings.</i></b></p> <p><b><i>Understand the day-to-day responsibilities of people who work in health and social care settings.</i></b></p> <ul style="list-style-type: none"> <li>• <i>Following policies and procedures in place in the health and social care setting in which they work.</i></li> <li>• <i>Healing and supporting recovery for people who are ill.</i></li> <li>• <i>Enabling rehabilitation.</i></li> <li>• <i>Providing equipment and adaptations to support people to be more independent.</i></li> <li>• <i>Providing personal care, to include washing, feeding, toileting.</i></li> <li>• <i>Supporting routines of service users, to include day-to-day family life, education, employment, leisure activities.</i></li> <li>• <i>Assessment and care and support planning, involving service users and their families.</i></li> </ul>			

## Getting started

Sheila is nearly 90 and is now quite frail. She lives alone in a ground floor flat and uses a wheelchair indoors. Sheila is on a very low income. Identify and list the health and care services that might be available locally to help her live independently. After completing this unit, see if you can add more services to your list.



## A

# The roles and responsibilities of people who work in the health and social care sector

### Key terms

#### General practitioner –

a doctor who does not specialise in a specific branch of medicine but provides ongoing treatment and preventative care in the community for a variety of medical problems that may be experienced by individuals of all ages.

**Preventative care** – care and education that aims to ensure people remain healthy, and are aware of factors that can lead to illness and poor health. It includes screening and vaccination programmes.

## Roles of people who work in health and social care settings

### Doctors

When people are feeling unwell, their first (or primary) point of contact with the medical profession will normally be a **general practitioner (GP)**. GPs provide ongoing care for people in the community. This includes:

- ▶ caring for people who are unwell, including carrying out simple surgical procedures
- ▶ providing **preventative care** and health education for service users.

GPs are increasingly based in local health centres, working with other doctors and a range of health and care professionals such as nurses, health visitors and counsellors. GPs may refer people to hospital specialists (consultants) or other care professionals for further assessment and treatment such as X-rays or blood tests, or to social workers for social care support.

The principle responsibilities of doctors in treating illnesses are to:

- ▶ diagnose an individual's illnesses and ailments
- ▶ discuss and agree an individual treatment plan
- ▶ prescribe appropriate medication or treatment
- ▶ monitor the impact of the agreed treatment.

The preventative care and health education services provided include:

- ▶ vaccination programmes for people of all ages
- ▶ health education and advice on issues such as smoking, alcohol consumption and healthy eating.

### Research

List the range of preventative care and health education services provided at your GP's surgery. Share this information with the other members of your group. Are there any significant differences in different areas?

Hospital doctors provide specialist medical care. In the UK and the Republic of Ireland, **consultant** is the title of a senior, hospital-based doctor who specialises in a particular field of medicine and manages complex cases. To provide this care, the consultant normally leads a team, or firm, of more junior doctors. This includes newly qualified doctors and more experienced doctors (known as registrars). Consultants are normally known by the name of their specialist field, for example:

- ▶ cardiologists specialise in treating heart disease
- ▶ psychiatrists specialise in treating mental health problems
- ▶ oncologists specialise in treating cancer
- ▶ paediatricians specialise in treating children
- ▶ geriatricians specialise in treating older people.

## Nurses

Nurses are the largest group of professionals working in the health services. There are many opportunities to specialise and to reach senior levels within the profession, including the role of nurse consultant or **nurse practitioner**.

- ▶ Adult nurses work with adults of all ages, who may have a wide range of physical health conditions. They may be based in hospitals, clinics or GP practices, or work for specialist organisations such as the armed forces. Many adult nurses work with people in their own homes. Adult nurses will often plan individual care, carry out healthcare procedures and treatments and evaluate their effectiveness. They also work to promote good health by running clinics and health education programmes on topics such as giving up smoking or weight loss.
- ▶ Mental health nurses are nurses who specialise in mental health work in a range of settings. These may include psychiatric units in hospitals, community healthcare centres, day care settings, residential homes and prisons. Mind, the charity that supports people with mental health problems, estimates that each year one in four people in the UK will experience mental health problems. Remember that most people who experience mental health problems are cared for in the community, not in hospitals.
- ▶ Children's nurses or paediatric nurses work with children with a very wide range of conditions. A children's nurse works closely with the child's parents or carers. This is to ensure that, as far as possible, the care provided meets their social, cultural and family needs, as well as addressing their health issues. Children's nurses may work in hospitals but also support children at home.
- ▶ Learning disability nurses work mainly with individuals with learning disabilities living in the community rather than in hospitals. This may include supporting people in schools and workplaces, people living at home with their families and people who live in specialist residential settings. They aim to work with people with learning disabilities and their carers to maintain the person's physical and mental health, provide specialist healthcare and support them to live as fulfilling and independent a life as possible.
- ▶ District nurses care for people of all ages, supporting them in their own homes or in residential homes. District nurses work closely with family members and other carers. They assess the patient's needs and also the care and support needs of their 'informal' carers. District nurses most commonly care for older people, people with disabilities and people recently discharged from hospital.
- ▶ Neonatal nurses work with newborn babies, including babies who are born prematurely. They work in specialist hospital settings and in the community. The neonatal nurse works very closely with the baby's parents and actively encourages them to take a practical role in their child's care.

### Key term

**Consultant** – a senior doctor, normally based in a hospital, who provides specialist expert healthcare support in their area of expertise.

### Key term

**Nurse practitioner** – provides expert consultancy service to patients and their carers. They contribute to the management and development of the care provision. They also undertake research and contribute to the education and training of other members of staff.



▶ An adult nurse talking to a patient

- ▶ Health visitors provide support for families in the early years of their children's life, normally from birth to the age of five. They offer support on health issues and minor illnesses, and advice on feeding and weaning. They carry out routine checks on the child's development and support parents in meeting the developmental needs of their children. Health visitors see the children and their carers in their homes, at clinics, at the GP practice and sometimes at a nursery or in other community settings.
- ▶ Practice nurses work in GP practices. In small practices there may be only one practice nurse, but increasingly they are part of a larger team of practice nurses. Practice nurses' responsibilities vary according to the GP practice but will normally include taking blood samples, carrying out child immunisation programmes and administering vaccinations for people travelling abroad. Practice nurses often provide **health screening** for men and women, and family planning advice, if they are qualified to do so.
- ▶ School nurses are usually employed by the NHS but may be employed directly by a school. They provide a variety of services, including developmental checks, administering immunisation programmes and providing health education programmes.

#### Key term

**Health screening** – the process of checking for the presence of disease in individuals who have no signs or symptoms of the illness. For example screening for the presence of cervical cancer for women or testicular cancer for men before they have any symptom of the disease.

#### Key terms

**Antenatal care** – care provided for a mother and her baby before the birth of the baby.

**Postnatal care** – care provided for a mother and her baby after the birth of the baby.

### Midwives

Midwives play a central role in supporting women through all stages of pregnancy, providing both **antenatal** and **postnatal** care. This includes helping families prepare for parenthood and delivering babies in the maternity departments of hospitals and in patients' homes.

Midwives may be based in hospital maternity units but an increasing number of midwives work in the community, providing support at local clinics in GP practices, in women's homes and at children's centres.

### Healthcare assistants

Healthcare assistants are sometimes known as nursing assistants or auxiliary nurses. They work under the guidance and with the support of qualified healthcare professionals. They may work in GP practices, hospitals, nursing homes and other

community healthcare settings. Most commonly healthcare assistants work alongside qualified nurses, but they may also work with midwives in maternity services. Duties carried out by healthcare assistants include:

- ▶ taking and recording a patient's temperature and pulse
- ▶ weighing patients, and recording the result
- ▶ taking patients to the toilet
- ▶ making beds
- ▶ washing and dressing patients
- ▶ serving meals and assisting with feeding when necessary.

### Social workers

Social workers provide help and support for people of all ages through difficult times in their lives. They aim to ensure that the most vulnerable people are safeguarded from harm and to help people live independent lives. Social workers support children, people with disabilities, people with mental health problems and the frail elderly.

Increasingly, social workers specialise either in providing services for adults or in providing services for children and young people.

- ▶ Adult services include services for older people, adults with disabilities, people with mental health problems and people who have learning difficulties. They support people living independently and those in residential care. They work very closely with the service users' families and carers.
- ▶ The children and young people's services provide support for children and their families. They play a key role in ensuring that children are safe and protected from abuse. If children are at risk from harm, social workers take measures to ensure that the children are removed to a safe place. This may, in extreme circumstances, include removing them from their home and family. Social workers also work in residential children's settings and manage fostering and adoption procedures. They provide support for young people leaving care and young people at risk of being in trouble with the law.

### Occupational therapists

Occupational therapists work with people of all ages who are having difficulty in carrying out the practical routines of daily life, for example washing and bathing, housework, cooking or getting to the shops. These problems may be the result of a disability, physical or psychological illness, an accident or the frailty of older age. The occupational therapist will agree specific activities with an individual that will help them to overcome their barriers to living an independent life. Occupational therapists may work in people's homes, GP practices, residential and nursing homes, prisons, social services and other council departments and in hospitals.

### Youth workers

Youth workers generally work with young people between the ages of 11 and 25. They aim to support young people to reach their full potential and to become responsible members of society. They work in a range of settings, including youth centres, schools and colleges. They may be employed by the local council but youth workers are also employed by a range of religious and other voluntary organisations. Youth workers are not always based in a particular building, especially if they are working with young people on the streets.



Typical youth work activities include:

- ▶ delivering programmes relating to young people's concerns, such as smoking, drugs, binge drinking, relationships and dealing with violence
- ▶ organising residential activities and projects
- ▶ running sports teams
- ▶ initiating and managing community projects with young people
- ▶ working with parents to support the healthy development of their children.



- ▶ Youth work covers a wide range of activities

### Care assistants

Care assistants provide practical help and support for people who have difficulties with daily activities. This may include supporting older people and their families, children and young people, people with physical or learning disabilities or people with mental health problems. Care assistants work in a wide range of settings, such as in clients' homes, at day care settings, in residential and nursing homes and in supported or sheltered housing complexes. Their exact duties will vary according to the needs of the clients, but could include:

- ▶ helping with personal daily care, such as washing, dressing, using the toilet and feeding
- ▶ general household tasks, including cleaning, doing laundry and shopping
- ▶ paying bills and writing letters
- ▶ liaising with other health and care professionals.

Sometimes care assistants will work with only one person, providing intensive support to enable them to manage everyday life.

### Care managers

Care managers have a key leadership role within residential care settings. They manage the provision of residential care for:

- ▶ adults and young adults with learning difficulties
- ▶ older people in residential care or nursing homes
- ▶ people in **supported housing**
- ▶ people receiving hospice care.

#### Key term

**Supported housing** – shelter, support and care provided for vulnerable people, to help them live as independently as possible in the community.

Care managers are responsible for the routine running of the residential care setting, including appointing suitable staff and managing staff teams, managing the budget and ensuring that the quality of care meets the standards required by the sector. Care managers will manage and supervise the duties of the care assistants working in their setting.

## Support workers

The support worker role is closely linked to the healthcare or nursing assistant role discussed earlier. Support workers, however, may work under the supervision of a range of health and care professionals, including physiotherapists, occupational therapists and social workers. Family support workers, for example work with and support social workers. Once the social worker has identified what is needed, the support worker may work closely with the family to help implement the plan. They may provide support with parenting skills, financial management or domestic skills.

### Reflect

Consider the range of health and care workers who support people at your work placement. There may be professionals or volunteers who are not included in this unit. The list is not exhaustive! Can you think of other professionals who might promote your clients' or patients' health and wellbeing further?

Keep a list to help you prepare for the exam.

### Research

In groups, use the internet and other up-to-date resources to identify the entry qualifications for a health and social care role and the main responsibilities of professionals working in the health and care services. Each group member should research a different job and share their results. You may want to present your work as a chart to help with revision.

## Case study

### Caring for Imran



Imran has multiple sclerosis. He uses a wheelchair both at home and when he goes out. Imran has a very caring family who are determined that they should look after him at home. He needs help with washing and dressing, he cannot feed himself any longer and he is incontinent.

### Check your knowledge

- 1 Identify the range of care professionals who might support Imran and his family in caring for him at home.
- 2 Briefly describe the contribution that each of the healthcare professionals you have identified may make to Imran's care and comfort.
- 3 Discuss your work with other members of your group. Have you missed anything?
- 4 Present your work in a table.

This will help you prepare for your exam.

## PAUSE POINT

Describe the key roles and responsibilities of a range of health and care practitioners.

### Hint

Close the book and list the key health and care practitioners that have been discussed.

### Extend

Briefly describe the roles and responsibilities of each practitioner.

### Key terms

**Policies** – detailed descriptions of the approach, and often the specific procedures that should be followed, in caring for clients.

**Procedures** – written instructions that outline the expected and required routines that care staff must follow in specific situations, for example reporting accidents or administering medicines, in order to implement agreed policies.

### Key term

**Safeguarding** – policies to ensure that children and vulnerable adults are protected from harm, abuse and neglect and that their health and wellbeing is promoted.

## Responsibilities of people who work in health and social care settings

In this section, you will consider the day-to-day responsibilities of people working in health and social care settings. You will examine the strategies that are in place to ensure that the care services promote the health and wellbeing of service users and meet the standards required by the health and care sector.

### Following policies and procedures in health and social care settings

Health and social care organisations have guidelines that describe the working procedures that should be followed to ensure that the care provided meets service users' needs. **Policies** and **procedures** aim to ensure that all staff and volunteers work within the law and to the highest professional standards.

The specific policies in place in a care setting will vary according to the client groups served and the particular function of the setting. These policies may include:

- ▶ health and safety policy
- ▶ equality and diversity policy
- ▶ medication policy
- ▶ **safeguarding** policy
- ▶ Disclosing and Barring Service (DBS) referral policy
- ▶ death of a resident procedures
- ▶ complaints policy.

### Research

When you are on work placement, ask your supervisor for a copy of one of their policies. Summarise the policy and explain to the rest of your group how it is used to promote the health and wellbeing of the people you support.

Make notes during other people's presentations in order to gather information about as many policies as possible.

### Reflect

Think about the range of policies in place at your work placement setting. Are all staff familiar with them? Are the policies always implemented? What action is taken if staff or volunteers do not follow the official procedures?

Make a note of your answers to help you with your revision.

## Healing and supporting recovery for people who are ill

There are clearly many different strategies that may be used to support the recovery of people who are ill. The precise support needed will depend on the service user's condition and also their wider social and personal needs.

The range of treatments and care procedures used in healthcare settings may include:

- ▶ **Prescribing medication**, this has traditionally been the doctor's role. However, some nurses have undergone additional training and taken on the role of nurse prescriber. Some other healthcare practitioners, such as dentists, chiropodists and physiotherapists, may prescribe some medications in certain circumstances.

### Research

Visit the Pharmaceutical Services Negotiating Committee website and research who can prescribe medications and in what circumstances.

- ▶ **Surgery**, which may play a significant part in supporting an individual's recovery from illness and other physical disorders. For example, cancerous tumours such as breast lumps may be removed by surgery if cancer is diagnosed at an early stage. Older people may require joint replacement surgery, such as hip or knee joints. Health and care workers in the community have an increasingly important role in supporting people recovering from surgery. This may include visits from the district nurse to monitor progress and provide specific treatments, including changing dressings. Physiotherapists and occupational therapists, where necessary, support mobility and promote independence in carrying out daily living activities. Social workers may provide additional emotional support and ensure that the patient is accessing the services available. Home care workers may provide practical help in the home, including preparing meals where this is seen as necessary. A patient's recovery will continue after discharge from hospital. Community support is particularly necessary as there is a trend to discharge people as soon as possible following surgery.
- ▶ **Radiotherapy**, is treatment using high-energy radiation. Treatment is planned by skilled radiotherapists working alongside a team that includes radiographers and specially trained nurses. Although radiotherapy is often used to treat cancer, it can be used to treat non-cancerous tumours or other conditions, such as diseases of the thyroid gland and some blood disorders. Patients may need support from their GP on completion of the treatment to ensure full healing. Common side effects of some forms of radiotherapy include itchiness and peeling or blistering of the skin.
- ▶ **Organ transplant**, involves either moving a body part or organ from one person's body to another's (known as an allograft) or from one part of a person's body to another location in their own body (known as an autograft). The purpose of the transplant is to replace the patient's damaged or absent organ. Organs that can be transplanted include the heart, kidneys, liver, lungs, pancreas and intestines. The most commonly performed transplants are the kidneys followed by the liver and the heart. A living donor can give one kidney, part of their liver and some other tissues, such as bone marrow. However, other transplants come from donors who have recently died, so in the recovery period following surgery the person receiving the transplant may need the support of a counsellor. Highly skilled surgeons and their teams will carry out the transplant. However, many more care professionals will be involved in preparing the individual physically and mentally for surgery and caring for the person following their transplant. For example, specialist nurses, physiotherapists, occupational therapists, counsellors and social workers may provide post-operative support.
- ▶ **Support for lifestyle changes**, changing the pattern of daily routines and habits that are damaging to health can be very challenging, but may be very important in improving a person's health. Counselling and the support of **self-help groups** may be crucial in implementing and sustaining lifestyle changes. For example, introducing a more healthy diet, taking more exercise, reducing the amount of alcohol consumed and stopping smoking. Healthcare professionals, such as GPs, practice nurses and district nurses, can assist individuals to set up self-help groups, for example by allowing them to meet in a room in a GP practice.

### Key term

**Self-help groups** – groups formed by people who share a common issue that they wish to address. The members provide advice, support and care for each other. For example, Alcoholics Anonymous is a self-help group for recovering alcoholics.

- ▶ **Accessing support from specialist agencies**, many specialist agencies support and promote the health and wellbeing of service users, especially those who have specific illnesses or disorders. Healthcare professionals can inform their service users about these agencies, some examples include:
  - Age UK – provides services and support to promote the health and wellbeing of older people.
  - Mind – provides advice and support for people with mental health problems and campaigns to raise awareness and improve services for people with mental illnesses.
  - YoungMind – is committed to improving the mental health of children and young people, through individual support and through campaigning for improved services.
  - The Royal National Institute of Blind People (RNIB) – supports people affected by sight loss, both people who are partially-sighted and those who are blind.
  - Alzheimer’s Society – provides information and support for people living with dementia, their families and their carers. It also funds research and promotes awareness of this condition.

### Research

Investigate one specialist organisation or agency that provides specific advice and support for the people cared for at your work placement setting. Write a short report of the aims, objectives and key activities of the organisation. Email this to other members of your group.



## PAUSE POINT

Close the book and list the range of policies in place in health and social care settings.

### Hint

Think about the policies in place at your work placement setting.

### Extend

Briefly describe the main requirement of one policy at your work placement setting.

## Enabling rehabilitation

The purpose of a **rehabilitation** programme is to enable a person to recover from an accident or serious illness and to live, as far as possible, an independent and fulfilling life. These programmes are particularly important after someone has a heart attack or a stroke, or following an accident that has significantly reduced their mobility or their reaction speed. Rehabilitation programmes may also be a central part of treatment for people who have a mental illness. The specific programme will vary according to the person’s physical and psychological needs and their home and family circumstances, including the level of support from their family, friends and carers. Rehabilitation may include support from physiotherapists, occupational therapists, counsellors or **psychotherapists**.

### Key terms

**Rehabilitation** – the process of restoring a person to good health following surgery, an accident or other illness, including recovery from addiction.

**Psychotherapy** – type of therapy used to treat emotional and mental health conditions, usually by talking to a trained therapist one-to-one or in a group.

It may also include using **complementary therapies**. Complementary therapies are not considered **conventional medical treatment**, and so may not be available as part of an individual's NHS care.

### Discussion

Consider the range of support that may assist the rehabilitation of an elderly woman who lives alone and has not left her house since she had a burglary. Which health and care professionals might support her to live a more fulfilling life? What strategies could they use?

## Providing equipment and adaptations to support people in being more independent

A vast range of equipment is available to support people to remain independent when carrying out their routine daily activities. There are many reasons for people needing temporary or permanent assistance with mobility or other activities of daily life and their needs are usually assessed by a physiotherapist or occupational therapist. Other healthcare professionals, such as doctors or nurses, may refer a service user to a physiotherapist or occupational therapist for assessment. Care assistants and health care assistants often provide ongoing support in using equipment effectively and adaptations to increase a service user's independence.

### Equipment to increase mobility

At the simplest level, mobility appliances allow people to be more physically active and more independent in carrying out daily routines. For example, people with arthritis, people who have broken a limb or are recovering from surgery or a stroke, or who have a progressive disease such as multiple sclerosis, motor neurone disease or muscular dystrophy or are simply ageing and have less strength in their bones and muscles. Mobility aids include:

- ▶ walking sticks
- ▶ walking frames, including tripods and tetrapods
- ▶ wheelchairs, manual or electric
- ▶ adapted shopping trolleys
- ▶ stairlifts
- ▶ adapted cars, or other motorised transport.

### Appliances that support daily living activities

Individuals may need a range of other appliances to support daily living activities and to promote their independence. These could include:

- ▶ special cutlery with thick, light handles that are easy to hold for people with arthritis
- ▶ feeding cups or angled straws for drinks
- ▶ egg cups and plates with suctioned bottoms
- ▶ special gadgets to help people who can only use one hand to take the lids off jars and tins, and others to help with peeling potatoes and buttering bread, kettles on tipping stands and adapted plugs to help with using electrical appliances
- ▶ special dining chairs and armchairs adapted to meet individual needs
- ▶ bathing aids such as walk-in baths and showers, bath and shower seats
- ▶ raised toilet seats for service users who find it difficult to sit down and stand up again

### Key terms

#### Complementary therapies

– a wide range of treatments designed to treat the whole person rather than the symptoms of their disease. For example, acupuncture, aromatherapy and reflexology.

#### Conventional medical treatment

– also called orthodox treatment. A system of treating an individual's symptoms and diseases by using drugs, radiation, or surgery administered by medical doctors and other healthcare professionals (such as nurses, pharmacists, and therapists).



- ▶ A raised toilet seat is helpful to people who have reduced mobility

### Key term

**Assistive technology** – any tool or strategy used to help people with disabilities complete their studies successfully and reach their potential.

- ▶ adapted computer keyboards and, where necessary, screens to support people with a range of physical conditions, including epilepsy, arthritis and visual impairments.

Some people with chronic conditions may need highly sophisticated equipment in their home to manage an independent life. For example, people with chronic bronchitis, emphysema or a coronary heart condition may need oxygen cylinders at home and people with kidney failure may need dialysis equipment.

### Technology and other resources that support educational achievement

**Assistive technology** and a very wide range of other resources are available to support people with disabilities and other illnesses to meet their educational potential. These include:

- ▶ adapted computers to meet the needs of visually impaired and blind people
- ▶ availability of signers and other communicators for hearing-impaired and profoundly deaf people
- ▶ ensuring wheelchair access to all learning spaces
- ▶ additional time in examinations for learners who are dyslexic
- ▶ enlarged text for people with poor vision.

### Research

Investigate the range of adaptive equipment available to support someone:

- with arthritis in their hands and fingers
- who uses a wheelchair
- who has a degenerative eye condition and is partially sighted.

Which healthcare professionals might be able to help them find the adaptive equipment they need? How might the equipment be paid for? Would they have to buy it themselves?

### Providing personal care - including washing, toileting and feeding

Keeping clean, enjoying a meal and using the toilet when needed are tasks and activities that most people are able to take for granted and do for themselves. However, when people become either physically or mentally ill, or they have a disability, these everyday activities become a challenge. There are clearly important reasons, in terms of physical wellbeing, why people should be clean, eat well and be able to use the toilet when necessary. Dealing with these very personal areas of life has an impact on self-esteem and general confidence. It cannot be overemphasised how important it is for health and care workers to approach these intimate areas of a person's daily life with thoughtfulness and sensitivity.

Carers must discuss usual routines and preferences in terms of personal hygiene and diet with clients. For example, when washing the client may prefer a bath to a shower, or a thorough wash to either of these. Most people would prefer to take personal responsibility for these tasks and wash in private. Independence should be encouraged, but where specific help is needed the client's dignity and privacy should be preserved. Toilet and bathroom doors should be closed and shower curtains drawn. You should follow the policies and procedures of your setting to ensure the safety and dignity of your service user while carrying out these intimate tasks.

**Domiciliary care** workers, who provide support for people living in their own homes, will often provide personal care of this type. In a residential home care assistants will provide this support and in hospitals it will be a regular task for health care assistants working on the ward.

### Key term

**Domiciliary care** – care provided in the service user's own home. This may include district nurses, home care workers and health visitors.

A wide range of equipment is available to extend the independence of people in terms of their personal hygiene and to support carers providing personal care. Equipment includes:

- ▶ walk-in baths
- ▶ showers suitable for the use of wheelchair users
- ▶ non-slip bathmats
- ▶ bath and shower seats
- ▶ hand rails
- ▶ bath lifts and hoists
- ▶ adapted taps
- ▶ bedpans and commodes
- ▶ female and male urinals.



▶ An adapted bathroom

Healthcare professionals must also be aware of and respect religious and cultural differences related to personal cleanliness, for example:

- ▶ Muslims and Hindus normally prefer to wash in running water rather than have a bath
- ▶ Muslims and Hindus often prefer to use a bidet rather than use paper after using the toilet
- ▶ Sikhs and Rastafarians do not normally cut their hair
- ▶ Hindus and Muslims would strongly prefer to be treated and supported by someone of the same sex.

Eating and drinking is vital for life itself, but meal times are also a social activity and ideally an enjoyable occasion. Dining areas should be clean and a pleasing environment. Most people in care settings are able to feed themselves. However there will be clients who experience difficulties because of their physical condition, because they are confused, or because they are emotionally unsettled. They may be depressed or unhappy in the setting and find it difficult to eat.



### Key terms

**Halal** – an Arabic term meaning permissible or allowed. Used in the context of preparing food according to Islamic law set down in the Quran, for example how animals are killed and meat prepared for consumption.

**Kosher** – means suitable. Used in the context of food preparation and consumption according to Jewish dietary laws. Covers permitted and forbidden foods, for example not cooking or eating milk and meat products together.

**Gluten** – a protein found in wheat and some other grains. When people with coeliac disease eat gluten they experience an immune response that attacks their small intestine causing symptoms such as abdominal bloating, pain and diarrhoea.

### Key term

**Informal care** – care and support provided by relatives and friends, normally unpaid and in addition to the care provided by professional health and care providers.

Some people will be capable of feeding themselves with minimal assistance and often using specially designed eating and drinking equipment, such as those referred to earlier in the unit, will allow them independence.

Many people have specific dietary requirements. This will sometimes be related to religious belief, sometimes to physical disorders and sometimes to personal choice, for example:

- ▶ vegetarians do not eat fish, meat or meat-based products – this could include jelly
- ▶ vegans do not eat meat or any animal-related products, including eggs, cheese, cow's or goat's milk
- ▶ Muslim and Jewish people do not eat pork and they require their meat to be killed and prepared for consumption in a particular way, Muslims eat **halal** products and Jews **kosher** foods
- ▶ Hindus and Sikhs do not eat beef
- ▶ people with coeliac disease require a **gluten**-free diet
- ▶ other people have specific allergic reactions to particular foods – allergic reactions to nuts, strawberries, dairy products and shell fish are particularly common.

### Reflect

Use a catalogue or the internet to see the wide range of adaptations and equipment available to support people to wash, use the toilet and eat and enjoy their meals. Think about the people at your placement. Would these adaptations help them? Make notes so that you can describe key equipment and its purpose. You may need to do this in your final assessment.

## Supporting routines of service users in the context of their day-to-day family life, education, employment and leisure activities

Earlier in this unit, the specialist support provided by a wide range of health and care professionals was discussed. Although many health and care staff have expert knowledge and high-level skills in particular areas, they will also try to address the wider personal needs that may emerge while working with their service users. This could include, for example a nurse not just attending to a service user's physical needs but also being aware of their wider social, emotional, spiritual and educational needs. Addressing these may be just as important for a speedy and successful recovery as the medical interventions and physical care that needs to be delivered and monitored.

In attending to the needs of the 'whole' person, health and care professionals will want to support clients in developing and maintaining a fulfilling and satisfying daily life. This will involve being aware of the community in which their client lives, their work, their family circumstances, their general financial position and their interests, hobbies and aspirations. It also includes being aware of the support provided by family, friends and neighbours, who are often referred to as **informal carers**. These wider considerations can be as important to a person's recovery as medicines and other clinical interventions.

### Link

You can find out more about caring for the whole person, or holistic care, in the section on Holistic approaches, and also in *Unit 10: Sociological Perspectives*.

**Discussion**

Consider how far the care provided at your placement, or at any other care setting with which you are familiar, supports routines that develop good links with families, and promotes opportunities for extending education, employment and leisure activities. Discuss your thoughts, knowledge and experience with other members of your group.

**PAUSE POINT**

Close the book. List items of adaptive equipment that service users may use to be as independent as possible in daily life.

**Hint**

Think about the various things people have to do throughout the day, eg get up and dressed, wash, eat, travel etc.

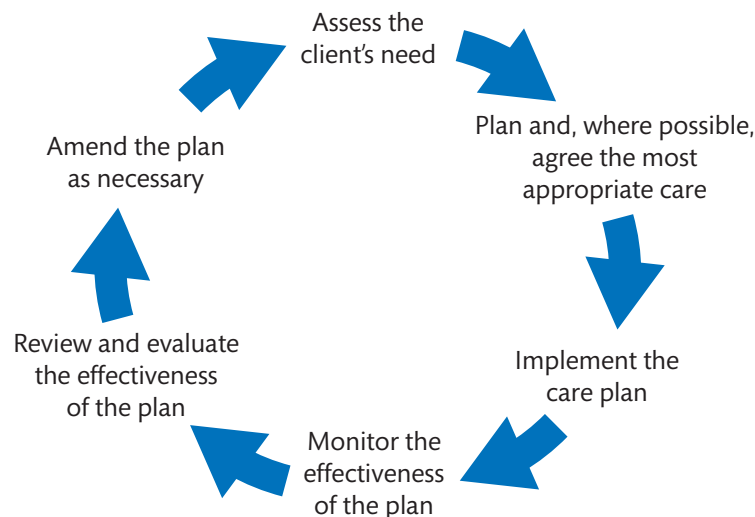
**Extend**

Explain the impact of using this equipment in promoting health and wellbeing.

### Assessment and care and support planning, involving service users and their families

As was discussed earlier in this unit, health and care professionals' skills are wide ranging and cover many specialities. However, despite the differences in skills, experience and specialist knowledge, all health and care professionals are likely to take a similar approach to planning and evaluating care. Often referred to as the care planning cycle (see Figure 2.1), this approach involves:

- ▶ assessing the individual healthcare needs of their service users
- ▶ agreeing a care plan that promotes the service user's health and wellbeing
- ▶ evaluating the effectiveness of the care implemented.

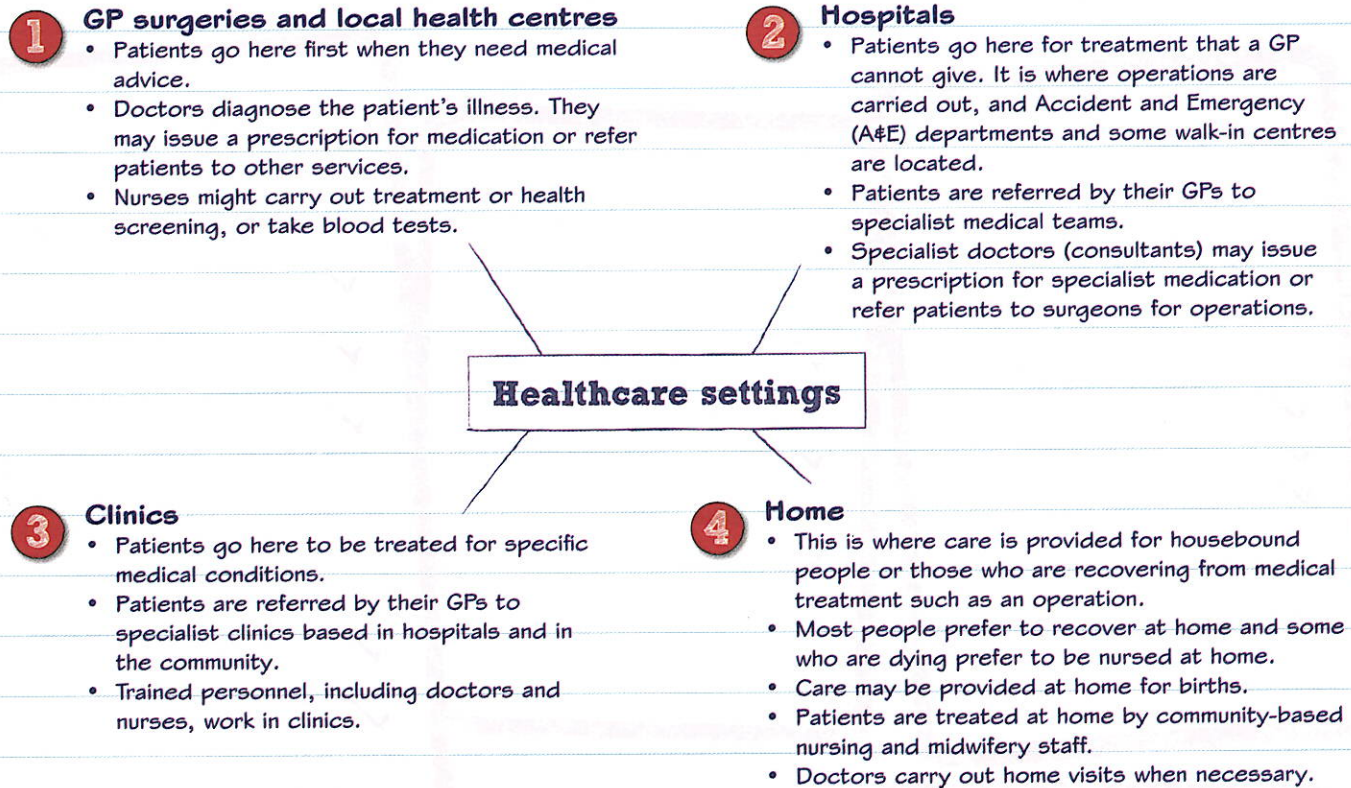


▶ **Figure 2.1** The care planning cycle

The process is cyclical, interventions and changes may be introduced at any point in the process. Adjustments may be necessary, for example in response to changes in the client's health or social circumstances, the resources that are available, the specific expertise of the staff or multi-disciplinary team or changing levels of support from informal carers.

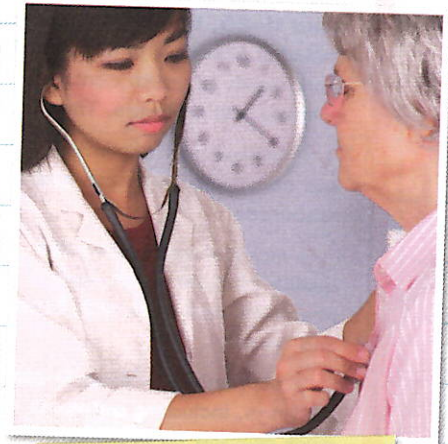
# Healthcare settings

Healthcare workers carry out their roles in four main settings.



## Settings and treatment

- 1 A patient attends an appointment at their GP surgery to report pains in their chest. The doctor asks questions and might use equipment to help them diagnose the problem.
- 2 The doctor refers the patient to a clinic at the hospital, where the patient is seen by a specialist / consultant.
- 3 The specialist/consultant decides that, at this stage, an operation is not necessary but they prescribe medication to control the heart rate.
- 4 After one month of taking the medication, the patient has an appointment with a nurse at their GP surgery. The nurse checks their progress and the patient might need another appointment with the doctor.



A GP uses a stethoscope to measure the patient's heart rate.

### Now try this

Write an example scenario showing the healthcare settings that might be involved in diagnosis, treatment and recovery of a patient with appendicitis.

You need to know where services and treatment are provided.



Look at page 56 to revise healthcare roles.

# Social care settings

There are three main settings where social care workers carry out their roles.

## 1 Residential care settings

- These are settings where people who can't be cared for at home, or who feel that they can no longer cope with living on their own, are looked after.
- They may provide full-time or temporary respite care to give a break to carers, or those who struggle living on their own.
- Social care workers provide residents with personal care, such as washing, toileting and dressing.



It is important for the wellbeing of people who live in residential care settings that care workers provide activities to keep residents' minds and bodies stimulated.

### Social care settings

## 2 Domiciliary care

- Social care workers provide care for people in their own home.
- Care workers help people lead their daily lives by supporting their independence.
- Social care workers might help people with shopping, cleaning and transport, such as taking them to a doctor's appointment.
- Social care workers can provide carers with a short break from their duties.

## 3 Daycare centres

- These are used by older people and those with physical and learning disabilities.
- They provide respite care.
- Social care workers might take part in leisure activities with people attending.

## Benefits for people in residential care

- 👍 Trained staff meet people's needs and support them.
- 👍 Specialist support is available for those with more complex care needs.
- 👍 Companionship is provided by other residents and staff.
- 👍 A range of stimulating activities is offered.

## Difficulties for people in residential care

Social care workers have to support people to overcome the difficulties of residential care:

- 👎 losing some or all of their independence
- 👎 reluctance to leave their own homes
- 👎 isolation from friends and relations
- 👎 cost of care.

## Now try this

Alicia is 82, housebound and very frail. Her daughter, Magenta, is 62 and provides some of her care. She is supported by three care assistants who help to provide personal care for Alicia.

Describe **two** ways that **respite care** is provided for people like Magenta who provide care for family members.

Read the scenario and question carefully. Here, your answer must be about Magenta, not her mother, Alicia.

Task – complete the table:

<b>Role:</b>	<b>Role and Responsibilities:</b>	<b>Qualifications:</b>	<b>Health or Social Care:</b>	<b>Professional/Non-Professional:</b>	<b>Hands on/Administrative:</b>
Doctors					
Nurses					
Midwives					
Healthcare assistants					
Social Workers					
Occupational Therapists					
Youth Workers					
Care managers/assistants					
Support workers					

<https://www.healthcareers.nhs.uk/> or use the textbook chapters.

(c) Explain what your role as a healthcare assistant involves.

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6 marks



**Revision Guide**  
pages 56, 60,  
75, 93, 95 and  
100

**Hint**

For this **explain** question, you need to give examples of what a healthcare assistant does, and include some detail with each example. If you are finding it hard to think of examples, you could imagine what you would need help with if you had limited mobility after a fall and were in hospital. (A hospital is another place where healthcare assistants work.)

**Hint**

Use the number of marks available as a guide to how many healthcare assistant's duties you should write about.

## **Task – Flash Card**

Skim through the above pages of the textbook and create flash cards on each job role, include key terms.

**Suggested  
additional  
SIL**