KS4 Health & Social Care Revision Topic Overview

Unit One: Introduction to the health and social care sector (TAHSC 1)

☐ Types of health and social care services
- statutory, private, voluntary

☐ Functions of health and social care services
- long-term/short-term, residential, respite, community, rehabilitation, specific service provision to meet needs

☐ Job roles within the health and social care sector
- social worker, nurse, doctor, health care assistant, activities co-ordinator, outreach worker, occupational therapist, counsellor, dietician

☐ Types of referral used to access health and social care services
- Self, professional, compulsory, third party

☐ Barriers to accessing health and social care services may be overcome
- Communication, cultural values and beliefs, cost, location, physical access, psychological, lack of resources, time

☐ Health and social care services accessed by individuals through the life stages
- Infancy, childhood, adolescence, early, middle, late adulthood

☐ Types of informal carers
- Family, friends, neighbours, community groups, volunteers

☐ The role of regulatory and inspection bodies
- the Care Quality Commission (CQC), Ofsted

Unit Two: Professional practice and the health and social care practitioner (TAHSC 2)

☐ Professional skills, behaviours and attributes required by health and social care practitioners
- be trustworthy, be objective, be patient, be respectful, show empathy, show commitment, use communication and interpersonal skills, use initiative, use observation skills, be able to problem-solve, be able to work as part of a team, be a reflective practitioner

☐ Reasons for health and social care practitioners adhering to their job description
- policies and procedures, professionalism, limits and boundaries, commitment

☐ Why continuing professional development is integral to the role of the health and social care practitioner
- up-to-date knowledge and practice, continuous improvement in provision and outcomes, regulatory requirement, personal and professional growth, reflective practitioner, application of learning

☐ Legislation and standards which underpin practice
- Legislation: General Data Protection Regulation, Human Rights Act 1998, Equality Act 2010, Health and Social Care Act 2012, Care Act 2014
- Standards: codes of practice, regulations, National Occupational Standards, 6Cs

☐ Health and social care values
- duty of care, safeguarding, person-centred, partnership, dignity, respect, rights, confidentiality, independence

☐ How individuals accessing services are valued
- during daily routines: mealtimes, personal care, activities and decision making
- consider: individual needs and preferences, informed choice, active support, aids and adaptations, health and safety, confidentiality

☐ Person-centred practice its Impact for individuals
- meeting individual needs (social, emotional, cognitive and physical), promote and uphold rights, health and well-being

☐ A working relationship and a personal relationship
- policies and procedures, limits and boundaries of professional relationships, underpinned by health and social care values, confidentiality

☐ How health and social care practitioners work in partnership
- multi-agency: organisations (agencies) working together to meet an individual's needs, multi-disciplinary: health and social care practitioners with different roles and responsibilities (disciplines) working together to meet an individual's needs, include national and local approaches to safeguarding, ie safeguarding boards, Team Around the Child

☐ How partnership working meets the needs of individuals
- benefit from expertise ⬚ working together towards shared goals, defined roles and responsibilities, care planning, intervention, referrals, consistent and continuous care, safeguarding

☐ Barriers to partnership working
- ineffective communication, time management, resources.

☐ Strategies to overcome barriers to partnership working
- effective communication, co-operation, collaboration, understand viewpoints, problem-solving ⬚ resolution

☐ Opportunities for career development in health and social care
- volunteering, education, employment, progression

☐ Sources of information in relation to career development
- organisations and services, careers advisors, internet, media, work experience/placement

☐ Qualifications and training opportunities in relation to career development
- further education, higher education, apprenticeships, required for specific roles, continuous professional development

Unit Three: Human growth and development through the life stages (TAHSC 3)

☐ Stages of development
- gestation period from conception to birth to include significant developments

☐ The potential effects on development of
- pre-conception experiences, pre-birth experiences, birth experiences

☐ Pre-conception experiences
- alcohol, drugs, smoking, diet, health, environment

☐ Pre-birth experiences
- antenatal care, alcohol, drugs, smoking, diet, health, environment, complications during pregnancy

☐ Birth experiences
- complications during labour for baby and mother.

☐ Life stages
- infancy, childhood, adolescence, early, middle, late adulthood.

☐ Social, emotional, cognitive and physical developments within each life stage
- Social: relationships, independence, cultural
- Emotional: attachment and emotional resilience, self-image, self-esteem
- Cognitive: language, memory, reasoning, thinking, problem-solving
- Physical: early developments and health, puberty, aging process
- Holistic development: the ways individuals develop holistically through the interdependency of each area

☐ The nature versus nurture debate in relation to human behaviour and development
- Nature: genetic, inherited characteristics, biological influences
- Nurture: environmental influences. ⬚ Debate: extent to which nature or nurture is responsible for an individual's development and behaviour, reasons why nature and nurture is debated

☐ Factors which may influence human development
- biological influences, lifestyle, education, employment, socio-economic, relationships, culture, physical environment, health, bullying, aspiration

☐ Reasons for recognising and responding to concerns regarding individuals' development
- to promote health and well-being, to meet individual needs, to meet the needs of family/carers/friends

☐ Transitions and significant life events (to include planned and unplanned) and impacts (short/long term)
- infancy: separation, nursery, weaning, toilet training
- childhood: school, siblings, moving home
- adolescence: puberty, exams, leaving home early
- middle, late adulthood: employment, marriage, parenthood, divorce, bereavement, retirement, age-related medical conditions.
- Impacts on emotion, relationships, independence, health, resilience

☐ The role of the health and social care practitioner
- in preparing individuals for a planned transition, in supporting the needs of individuals during transition and significant life events, adhere to policies and procedures, key working, assessment of needs, discuss, explore and reassure, positive relationships, partnership working, access to services, safeguard, understand implications for well-being if not effectively supported

☐ Purpose of individualised care planning
- individual needs, support needs, action planning and goal setting, risk management, consistency of care, continuity of care